

Sha Tin District Council
Minutes of the 2nd Meeting of
the Health and Environment Committee in 2017

Date : 9 March 2017 (Thursday)
Time : 2:30 pm
Venue : Sha Tin District Council Conference Room
 4/F, Sha Tin Government Offices

<u>Present</u>	<u>Title</u>	<u>Time of joining the meeting</u>	<u>Time of leaving the meeting</u>
Mr WONG Yue-hon (Chairman)	DC Member	2:30 pm	6:59 pm
Ms YUE Shin-man (Vice-Chairman)	"	2:30 pm	6:59 pm
Mr HO Hau-cheung, BBS, MH	DC Chairman	2:40 pm	6:03 pm
Mr CHAN Kwok-keung, James	DC Member	3:00 pm	3:37 pm
Ms CHAN Man-kuen	"	2:38 pm	6:59 pm
Mr CHIU Chu-pong, Sunny	"	2:30 pm	3:54 pm
Mr CHIU Man-leong	"	2:30 pm	6:29 pm
Mr HUI Yui-yu, Rick	"	2:30 pm	6:27 pm
Mr LAI Tsz-yan	"	3:37 pm	6:59 pm
Mr LEE Chi-wing, Alvin	"	5:50 pm	6:23 pm
Mr LEUNG Ka-fai, Victor	"	2:49 pm	3:03 pm
Mr LI Sai-hung	"	2:44 pm	6:04 pm
Mr LI Sai-wing	"	2:30 pm	6:59 pm
Mr LI Wing-shing, Wilson	"	2:30 pm	6:43 pm
Mr MOK Kam-kwai, BBS	"	2:48 pm	4:31 pm
Mr NG Kam-hung	"	2:30 pm	3:43 pm
Ms PONG Scarlett Oi-lan, BBS, JP	"	2:30 pm	6:40 pm
Mr PUN Kwok-shan, MH	"	2:30 pm	6:59 pm
Mr SIU Hin-hong	"	2:30 pm	6:59 pm
Mr TING Tsz-yuen	"	2:30 pm	6:42 pm
Mr TONG Hok-leung	"	2:30 pm	6:29 pm
Ms TUNG Kin-lei	"	2:30 pm	6:59 pm
Mr WAI Hing-cheung	"	2:30 pm	5:24 pm
Mr WONG Fu-sang, Tiger	"	2:30 pm	6:59 pm
Mr WONG Hok-lai	"	2:30 pm	6:04 pm
Mr WONG Ka-wing, MH	"	2:30 pm	6:03 pm
Ms WONG Ping-fan, Iris	"	2:34 pm	6:59 pm
Mr YAU Man-chun	"	2:30 pm	3:48 pm
Mr YIP Wing	"	2:30 pm	5:43 pm
Mr YIU Ka-chun	"	2:34 pm	6:56 pm
Mr YUNG Ming-chau, Michael	"	2:30 pm	6:59 pm
Mr MOK Man-lok, Mannix (Secretary)	Executive Officer (District Council) 1 / Sha Tin District Office		

<u>In Attendance</u>	<u>Title</u>
Mr WONG Tin-pui, Simon	Assistant District Officer (Sha Tin)
Mr TSAI Yu-sing, Eric	District Environmental Hygiene Superintendent (Sha Tin) / Food and Environmental Hygiene Department
Mrs TANG FUNG Shuk-yin	Senior Housing Manager (Tai Po, North and Sha Tin) 1 / Housing Department

In Attendance

Mr CHAU Wai

Ms CHUI Mei-chun, Flora

Mr YUEN Chun-kit, Derek

In Attendance by Invitation

Dr LO Su-vui

Prof LI Kam-tao, Philip

Mr WONG Chun-main, Andrew

Ms YEUNG Sau-ling, Stephanie

Mr LEE Kwong-ming

Mr MUI Kui-chuen

Ms LAM Lai-hang, Mable

Mr LAM Kwok-chuen

Mr LEE Din-yau

Mr LO Wai-kei

Dr. LUI Siu-yun

Mr YU John

Mr LAI Kwai-cheung

Mr SHIU Ying-kei

Mr WU Ho-wan

Mr LEUNG Chi-pang, Thomas

Mr WONG Chung-ying, Johnny

Absent

Mr PANG Cheung-wai, Thomas, SBS, JP

Mr CHAN Billy Shiu-yeung

Mr CHAN Nok-hang

Mr CHENG Tsuk-man

Mr CHING Cheung-ying, MH

Ms LAM Chung-yan

Mr MAK Yun-pui

Ms TSANG So-lai

TitleSenior Environmental Protection Officer (Regional North) 4 /
Environmental Protection Department

Deputy District Leisure Manager (Sha Tin) 2 /

Leisure and Cultural Services Department

Senior Executive Officer (District Council) /

Sha Tin District Office

Title

Cluster Chief Executive / New Territories East Cluster

Deputy Hospital Chief Executive / Prince of Wales Hospital

Chief Executive Manager (Capital Projects) / Hospital Authority

Senior Manager (Communications and Community Relations) /

Prince of Wales Hospital

Senior Manager (Hospital Planning and Facility Management) /

Prince of Wales Hospital

Manager (Capital Projects) / Hospital Authority

Senior Engineer / Consultants Management (3) /

Water Supplies Department

Senior Engineer (Acting) / New Territories East (2) /

Water Supplies Department

Engineer / New Territories East (Distribution 1) /

Water Supplies Department

Engineer / Consultants Management (14) /

Water Supplies Department

Medical and Health Officer (Community Liaison) 1 /

Community Liaison Division / Department of Health

Executive Officer I (Enforcement) 1 / Tobacco Control Office /

Department of Health

Senior Engineer / Kowloon and New Territories South 1 /

Drainage Services Department

Environmental Protection Officer (Sewerage Infrastructure) 61 /

Environmental Protection Department

Senior Field Officer (Animal Management) (Acting) / Development

3 / Agriculture, Fisheries and Conservation Department

Field Officer I (Animal Management) / New Territories South 1 /

Agriculture, Fisheries and Conservation Department

Patrol Sub-Unit 3 Commander / Ma On Shan Division /

Hong Kong Police Force

Title

DC Vice-Chairman (Application for leave of absence received)

DC Member (")

" (")

" (")

" (")

" (")

" (")

" (No application for leave of absence received)

Welcome Message

The Chairman welcomed all members and representatives of government departments to the 2nd meeting of the Health and Environment Committee (HEC) this year.

Application for Leave of Absence

2. The Chairman said that the Sha Tin District Council (DC) Secretariat had received the applications for leave of absence in writing from the following members:

Mr Thomas PANG	Attendance at meetings of an organisation under the Chinese government
Mr Billy CHAN	Sickness
Mr CHAN Nok-hang	”
Mr CHENG Tsuk-man	”
Ms LAM Chung-yan	”
Mr CHING Cheung-ying	Official commitment
Mr Alvin LEE	”
Mr MAK Yun-pui	”

3. Members unanimously endorsed the applications for leave of absence submitted by the above members.

Confirmation of the Minutes of the Meeting Held on 12 January 2017

(HEC Minutes 1/2017)

4. Members unanimously confirmed the minutes of the previous meeting.

Matters Arising

Responses of Government Departments to Matters Arising from the Previous Meeting

(Paper No. HE 14/2017)

5. Members noted the above paper.

Discussion Items

Proposed Estimates and Funding Proposals of Local Organisations under Expenditure Head 4 (Health and Environment) of 2017/2018

(Paper No. HE 15/2017)

6. Members endorsed the above paper unanimously.

Phase II Redevelopment of the Prince of Wales Hospital

(Paper No. HE 16/2017)

7. The Chairman welcomed the representatives of the Hospital Authority (HA) and the New Territories East Cluster (Cluster) to the meeting.

8. Prof Philip LI, Deputy Hospital Chief Executive of Prince of Wales Hospital (PWH) gave a brief introduction to the paper.

9. The views of Mr LI Sai-wing were summarised below:

- (a) it was learned from the news that the occupancy rate of PWH was 124% during the recent influenza peak. He expressed his absolute support for the redevelopment plan;
- (b) he was concerned about manpower issues. The medical and nursing staff remarked on the shortage of manpower previously and PWH would provide more beds after redevelopment. He asked if the manpower was sufficient;
- (c) citizens indicated that the waiting time for specialist out-patient services was long previously. He asked about the impact on the waiting time after redevelopment;
- (d) redevelopment involved demolition works and he asked how the services affected by the demolition would be dealt with;
- (e) he asked how to determine the services after redevelopment. The New Territories East had a large population and there were only Tai Po Hospital and North District Hospital except PWH. He was worried that the residents of Tai Po and North District would intend to seek medical consultation at PWH due to some unique services provided by PWH after redevelopment; and
- (f) after redevelopment, the number of users of PWH would increase. He asked whether the hospital had assessed the impact on traffic.

10. The views of Mr CHIU Man-leong were summarised below:

- (a) the waiting times at the accident and emergency department and the specialist out-patient clinic of PWH was the longest in Hong Kong. Therefore, redevelopment was an urgent task;
- (b) he wanted to know more about the construction cost of \$30 billion. He believed that the support of manpower was required while upgrading the hardware. He asked if there were more resources to train medical staff and whether more university places would be provided to train more medical staff;
- (c) he asked if the patients would be affected by piling works during the redevelopment. Although a consultant company could be hired for assessment, piling works would always generate noise and even cause vibrations in nearby buildings. He asked if the surgical procedure would be affected and if there were any other better ways to replace piling;
- (d) as the first stage of Phase II redevelopment would not be completed until 2027, he believed this period was too long. He asked if the completed floors could be put into service in stages. Whether other plans were considered to complete the redevelopment more expeditiously and if yes, he asked the hospital to inform the DC. The population ageing in Sha Tin and the New Territories East was fast. He hoped that the redevelopment plan could be expedited to meet the needs of the community; and

- (e) he asked whether moving the Administrative Department of PWH to the remote Sha Tin Hospital would affect the daily operations of the PWH.

11. The views of Mr HO Hau-cheung were summarised below:

- (a) since the DC of the previous term, some members had suggested to the authority that it was urgent to consult the DC on redevelopment project and redevelop the hardware of PWH as soon as possible. The documents submitted by the authority were too general and he asked if it could further explain how long the entire project would take. He understood that it would take about ten years for the first stage of the Phase II project to complete. He asked if the completed parts of the project would be put into service forthwith to cope with the imminent needs within this ten years;
- (b) he therefore urged the Legislative Council members to avoid filibusters on the redevelopment project of PWH, so as not to slow down the progress of this important project for people's livelihood;
- (c) the manpower of medical staff was also an important issue. It was not appropriate to cause waste if there was not enough support of manpower after the expansion of the hardware. It would take some time to complete the redevelopment project. The authority should consider enhancing staff training during the redevelopment period; and
- (d) for parking spaces, the hospital said that it would set up parking spaces in accordance with the regulations of the Planning Department. He asked if the number of parking spaces could exceed the upper limit of the planning standard to meet the demand. The original site of PWH and the scope of Phase I redevelopment were both located in areas with a high population density. It was expected that there would be a shortage of parking spaces at PWH. PWH was adjacent to a station on the MTR Ma On Shan Line (MOS Line) and whether it was possible to consider building additional facilities to connect the station on the MOS Line and PWH for the public's convenience. After the redevelopment of PWH, the number of users would increase. Traffic arrangement should be fully considered in the design of the project.

12. The views of Mr YIU Ka-chun were summarised below:

- (a) he was pleased to see the redevelopment of PWH. According to the paper, the total population of those aged 65 or above in 2024 increased by 66% over 2015. He asked whether the figure referred to the population in Sha Tin District or Hong Kong as a whole. In addition, the paper showed an increase of 8% in Sha Tin's total population as compared with 2015. The growth rate in Tai Po and North District should not be overlooked. The hospital should consider the population of New Territories East as a whole;
- (b) the scope of redevelopment accounted for two-thirds of the total area of PWH and it was a large-scaled project. However, the paper did not mention the design after redevelopment. For example, there was no information on whether there were basements to accommodate adequate parking spaces and the total number of floors. He believed that if the hospital submitted the same

documents to the Legislative Council for seeking funding, the project would not be easily approved. He asked whether the hospital would consult the DC again on the planning after the Legislative Council approved the appropriation. Residents of Prima Villa had remarked that they were affected by the light of the wards; he hoped the hospital could designate areas not facing the residential buildings as wards in the planning;

- (c) the hospital said that there would be 1 650 additional beds in the redeveloped building and a series of facilities would be moved to the new building. He asked how the vacated places would be dealt with;
- (d) he hoped that other methods should be adopted to replace piling in the works. Special attention should be paid to the noise and dust caused by the works so as to minimise the impact on nearby residents;
- (e) he asked about the changes in the services provided by the old building after the commissioning of the new building;
- (f) he inquired if the hospital considered building a footbridge connecting the station on the MOS Line and PWH when planning the new building so that citizens going to the PWH for medical advice would not have to pass the crossroads; and
- (g) the scale of this redevelopment project was enormous and would last for more than 10 years. It was not enough for the local communities to express their opinions simply through regular platforms or online platforms. He asked whether the authority would set up some liaison working groups to allow DC Members and local communities to provide opinions on the works plan.

13. The views of Mr TING Tsz-yuen were summarised below:

- (a) at a meeting of the Education and Welfare Committee (EWC), the Social Welfare Department (SWD) responded that 90 elderly people were still residing in the Shui On Nursing Centre which was affected by the redevelopment project and had not been rehoused. The present paper also did not mention the relevant arrangements for Shui On Nursing Centre, and he asked how the hospital would handle it. Members would not know this issue if they did not receive cases seeking assistance from the family members of the elders this time. He hoped that the paper submitted by the hospital to the DC would include comprehensive information in the future; and
- (b) he hoped that the hospital could set up a liaison working group to invite local communities to express their views on the plan.

14. The views of Mr WAI Hing-cheung were summarised below:

- (a) he asked whether the additional 1 650 beds after the redevelopment were calculated on the basis of the space after redevelopment or population growth. If the calculation was based on the population growth, he asked whether it was calculated according to the population in Sha Tin District or the population growth in the region. He asked if the 1 650 beds were net increase after

redevelopment and whether the original number of beds would be changed;

- (b) he asked about the arrangements for the demolished staff dormitory after the first phase of demolition and whether a sufficient number of dormitories would be built in the future. The manpower would increase after redevelopment. He asked if the demand for dormitories would subsequently increase;
- (c) he asked whether the original services would be affected during the second phase of demolition; if yes, how the hospital would minimise the impact;
- (d) noise would be generated when the works were carried out, affecting inpatients and nearby residents. He asked how the hospital would handle problems related to noise and traffic; and
- (e) the third page of the paper listed out the services to be provided upon the completion of the Phase II redevelopment plan. He asked about the differences between these services and the original services of the Phase I redevelopment and whether the missing services of the Phase I redevelopment were added.

15. The views of Ms Iris WONG were summarised below:

- (a) the population growth and aging rate of New Territories East as a whole were on the rise. She therefore supported the Phase II redevelopment plan of PWH to upgrade the existing facilities and hoped that the project could start as soon as possible;
- (b) the scale of the project was huge. She asked which specialist out-patient clinics would see the shortened waiting time upon redevelopment. She asked what kind of services would be affected during the redevelopment and what transitional arrangements would be made by the hospital;
- (c) the redevelopment process might generate noise and affect the patients in the hospital. She asked whether the hospital would set up some liaison working groups to allow stakeholders, such as patient advocacy groups, to communicate with the hospital about the project plan. With such a huge project, she asked members what channels were provided for them to know about the progress of the project and whether they would later communicate with other members at the meetings of DC and the role played by the DC in this project;
- (d) the redevelopment would be conducted based on priorities. She asked what considerations were made to set the priorities. The hospital did not submit environmental and traffic assessment report and it was difficult to discuss in detail. She asked whether the hospital would consult the DC again after the Legislative Council approved the appropriation to discuss the details of the arrangements; and
- (e) regarding traffic issues, she supported the proposal made by other members to construct a footbridge. At present, there were heavy loads on the PWH's bus station, minibus station and taxi stand. There was no ramp for wheelchair

users. The taxi stand was located at the back of the minibus station, making it inconvenient for passengers to board and alight from the vehicles. In addition, the branches next to the bus stop were too long. She had witnessed the tripping of elders by branches. She hoped that the hospital would consider widening the bus stop, the minibus stop and the taxi stand as well as including the details of various aspects such as the appearance into the planning of redevelopment works.

16. The views of Ms Scarlett PONG were summarised below:

- (a) she supported the redevelopment plan and believed that the hospital should provide more parking spaces for visitors and wards with user-friendly design and asked if pediatric wards could provide places for patients' family members to take a shower and rest. She believed that it was also important to build a footbridge to connect PWH and the station on the MOS Line; and
- (b) in terms of manpower, she hoped that the situation related to doctors, nurses, pharmacists, physiotherapists and radiotherapists could be followed up.

17. The views of Ms YUE Shin-man were summarised below:

- (a) an elderly care centre would be demolished because it was located within the redevelopment area of PWH. She asked about the arrangements for the elderly people living in the care centre; and
- (b) the redevelopment required additional manpower and she asked how the manpower training would be arranged.

18. The views of Mr PUN Kwok-shan were summarised below:

- (a) it was a common expectation throughout the New Territories East to begin the redevelopment of PWH as soon as possible. The paper was relatively simple and he hoped that the hospital would provide more information on the project as soon as possible. He praised the setting up of a green leisure zone for the enjoyment of the public after redevelopment;
- (b) in his opinion, an examination on the services of PWH should take into consideration the needs of the entire New Territories East. He asked whether the services provided by the CUHK Medical Centre (CU Medical Centre) and PWH could complement each other. The hospital said Sha Tin Hospital would set up a decanting building. He asked whether the hospital could provide more relevant information, such as the size and function of the building;
- (c) with regard to the 1 650 additional beds after the redevelopment, the hospital only indicated that there would be an increase of more than 400 beds in the first stage but did not mention when the remaining 1 200 beds would be added; and
- (d) although the paper mentioned that a series of services would be provided by Phase II project, there was no information on how the redevelopment could meet the needs of population growth in Sha Tin and even the New Territories

East in the future, such as the demand for rehabilitation and cancer treatment. He wanted to know the area ratio of medical and scientific research services after redevelopment.

19. The views of Ms TUNG Kin-lei were summarised below:

- (a) the population of the New Territories East was on the rise. The Sha Tin team of the Democratic Alliance for the Betterment and Progress of Hong Kong had always hoped that the hospital would implement the redevelopment project of PWH as soon as possible and therefore supported the plan;
- (b) she was concerned about whether the redevelopment project would affect the existing services, such as noise problems caused. She asked whether the hospital would continue to study expanding PWH if an addition of 450 beds in the first stage was not enough to meet the demand;
- (c) there was no mention of parking spaces in the paper and the hospital needed further study;
- (d) at present, the waiting time for collecting medicines from the pharmacies in PWH was very long. She was concerned about the shortage of manpower and how to increase the number of graduates to alleviate the shortage of medical and nursing staff; and
- (e) Li Ka Shing Specialist Outpatient Clinic and pediatric wards would be affected by the redevelopment project. She asked about the hospital's arrangements, such as where ophthalmology patients could attend follow-up consultations.

20. The views of Mr Tiger WONG were summarised below:

- (a) by 2024, the total population of those aged 65 or above would increase by 66% over 2015. He asked the hospital to provide a timetable for the period from the funding allocation to the completion of redevelopment project, whether the planning work of the redevelopment took into account the long-term needs, whether the project would be able to support the subsequent population growth upon its completion, and whether there was any relevant data for reference; and
- (b) at present, citizens went to PWH by transport. After getting off the vehicles, they still needed to walk a short distance to reach the core area of the hospital. He asked whether the transport arrangements would be considered in the design of the redevelopment project to shorten the walking distance between the alighting points and the core area of the hospital.

21. The views of Ms CHAN Man-kuen were summarised below:

- (a) she supported the plan in the light of population growth and social needs, but asked about the manpower support after the hardware upgrade. Hospital services would be affected by the shortage of manpower, such as whether the accident and emergency department would delay treatment due to lack of

manpower;

- (b) at present, the traffic condition in the vicinity of the PWH was rather chaotic. The hospital and authority should study ways to improve transport facilities, increase safety and provide convenience to the general public;
- (c) the residents remarked on the shortage of parking spaces at PWH. She asked whether the hospital would increase the number of parking spaces and how many parking spaces would be added after redevelopment; and
- (d) since the redevelopment project took time, she asked whether the existing services would be affected during the redevelopment, which services would be affected, and what measures the hospital would take to ensure that the services would not be affected.

22. The views of Mr Wilson LI were summarised below:

- (a) the population ageing in Sha Tin and the entire New Territories East had become more and more serious. He supported the redevelopment of PWH and believed that the redevelopment plan should be carried out without further delay. The political party to which he belonged also supported these livelihood projects and would avoid filibuster. However, he believed that the paper provided by the hospital this time was not detailed enough and hoped that the paper could provide more detailed information;
- (b) the paper mentioned that 1 650 additional beds would be provided to meet the demand of the New Territories East for the coming decade. He asked how the hospital estimated the future demand, whether the number of beds increased was adequate and what the plans after 10 years would be. The scale of the redevelopment project was huge; he asked how the hospital assessed the impact on the existing services;
- (c) the population increase and population ageing in the New Territories East were at rapid rates. Sha Tin had a vast territory. There were more than 200 000 people living in Ma On Shan. He asked about the plans of the authority on the out-patient clinics, hospitalisation, emergency medical treatment and evening consultation services in Sha Tin or Ma On Shan and whether the training of manpower could be accelerated;
- (d) the hospital should follow up on the transport facilities, the provision of additional parking spaces and the arrangement of Shui On Nursing Centre. He asked whether the hospital only planned to meet the standards of the Planning Department without setting up more parking spaces and whether concrete plans and figures for the future increase of parking spaces could be provided; and
- (e) in last November and January this year, he accompanied his grandmother to the Accident and Emergency Department of PWH for seeking medical consultation. After being defined as semi-urgent cases, they waited for 11 hours and 9 hours respectively for treatment. He asked the hospital whether it could provide any data on the waiting time at the Accident and Emergency

Department for members' reference at the next meeting.

23. The views of Mr SIU Hin-hong were summarised below:

- (a) he often held meetings with the hospital and knew that they were working hard to provide services for the public and offered many new services; and
- (b) sleep accounted for one-third of life time, but many people in Hong Kong suffered from insomnia. This problem was included as one kind of sleep apnea in Hong Kong. However, there were many sleep disorders such as sleepwalking. Insufficient sleep affected mood and work efficiency. He suggested that the authority should set up sleep departments in Hong Kong to treat the sleep problems of Hong Kong people.

24. Mr LI Sai-hung pointed out that the public hoped the waiting time at PWH would be shortened. The paper showed that the number of beds would be increased to resolve the problem of insufficient beds. In the long run, he asked whether the hospital could provide data or more detailed information on the measures for relieving the pressure of population growth and reducing the waiting time at the Accident and Emergency Department and on the manpower arrangements.

25. The views of Mr James CHAN were summarised below:

- (a) he was doubtful about the population projections provided by the hospital. According to the paper, the population of Sha Tin District would increase from 664 700 in 2015 to 721 100 in 2024, with an increase of only 56 400. However, from 2016 to the present, he believed that only the population of Shui Chuen O Estate had increased by 10 000 to 20 000. In other words, according to the hospital's estimates, the population would increase by only about 40 000 between 2015 and 2024. He hoped that the hospital could recalculate the number. In addition, he believed it was very difficult for the hospital to estimate the population of those aged 65 or above in the future, since 150 new immigrants came to Hong Kong every day and their age, sex and physical conditions were not recorded. Therefore, he asked how the hospital could estimate the future demand; and
- (b) he said that a few years ago, he sought medical consultation at PWH because of leg injury, and had to wait for 13 hours for treatment after he was categorised as a semi-urgent patient. He believed that the PWH should target at expansion of the accident and emergency department and psychiatric services.

26. The views of Mr WONG Ka-wing were summarised below:

- (a) he personally felt the hospital's efforts over the past few years. As a DC Member, he encouraged the hospital to continue to do better. He was glad to see the implementation of the redevelopment plan of the PWH;
- (b) he asked if the existing services would be affected during redevelopment; if yes, whether there were plans to reduce the impact and shorten the waiting time for specialist clinics; for example, whether some specialist cases would

be referred to neighboring medical institutions;

- (c) the hospital estimated the elderly population growth. Currently, some chronic disease patients had to wait for a long time for treatment such as cataract surgery and physiotherapy after suffering from stroke. He asked whether there was any plan to shorten the waiting time for treatment of these geriatrics such as increasing specialist out-patient services and the number of beds for elderly or chronic disease patients; and
- (d) he received a case yesterday that a 92-year-old elderly person fell at his home and was admitted to Sha Tin Hospital a few days after being hospitalized at PWH. Later, he was sent back to a nursing centre in City One Sha Tin due to tight supply of beds at Sha Tin Hospital. Finally, the elder decided to go back home because he/she was dissatisfied with the services provided by the nursing centre. In his opinion, this case showed that the hospital had insufficient resources to meet the needs of the elderly. He hoped that the hospital could face up to the problem and increase resources.

27. Mr WONG Hok-lai asked if the 1 650 beds mentioned in the paper were net increases, and what was the computation basis for the increase in number of beds. In addition, it would take several years for the project to be completed and whether the additional beds would turn out to be insufficient then. As a result, the problem of insufficient beds and excessively long waiting time would not be alleviated.

28. The views of Mr Rick HUI were summarised below:

- (a) in his opinion, the paper provided by the hospital did not mention the benefits brought by the redevelopment. He hoped that the hospital could provide more data, such as the waiting time at the Accident and Emergency Department, specialist clinics and for various kinds of surgery, the relevant manpower arrangement plans and figures, as indicators for judging the actual benefits brought by the redevelopment; and
- (b) previously, he had also participated in the work relating to filibuster in the Legislative Council. Filibustering was a way to raise questions about the unclear parts of motions proposed by departments. Well-known philosopher Wittgenstein said that anything that could be said could be said clearly. The redevelopment plan of the hospital could be clearly expressed by use of data. If the paper could be clearly submitted to the Legislative Council, filibuster would be avoided.

29. The views of Mr NG Kam-hung were summarised below:

- (a) medical equipment was the focus of medical treatment. He believed that redevelopment efforts could be further strengthened so as to meet the demand at the time when the project was completed; and
- (b) currently, the waiting time for collecting medicine was longer than that for medical treatment. He hoped that the redevelopment plan could effectively shorten the waiting time for collecting medicine.

30. The views of Mr LAI Tsz-yan were summarised below:

- (a) according to the paper, 1 650 beds and many different services would be provided after redevelopment. He asked what were the differences between services and number of beds mentioned in the paper and those of the present ones; and
- (b) he asked whether the hospital had assessed the impact of the redevelopment on the residents nearby.

31. The views of Mr Sunny CHIU were summarised below:

- (a) the paper did not compare the post-redevelopment services with the existing services. He asked whether the additional 1 650 beds were net increases or there were 1 000 beds originally and over 600 beds were added; and
- (b) he asked if consideration would be given to adding dental care services for the elderly in the redevelopment plan, and whether the number of staff such as doctors and nurses would be increased to meet the demand after the hardware was upgraded.

32. The views of Mr Michael YUNG were summarised below:

- (a) he previously searched for information on the Phase I redevelopment project of PWH in 2006 on the DC website and found that some pages of online documents were missing due to long lapse of time. Therefore, he requested the Secretariat to print the relevant documents during the meeting and it took a lot of time for the Secretariat to provide them, which once again showed the shortage of manpower in the Secretariat. He hoped that the Sha Tin District Office (DO) could look squarely at it;
- (b) the paper on the Phase I redevelopment project of PWH was discussed at the DC in 2006. At that time, staff of the Architectural Services Department helped explain problems in respect of architecture. The paper pointed out that the average area of PWH at that time was lower than the standard. He asked about the average area, in terms of square meter, of the beds at PWH currently;
- (c) he understood that redevelopment was a must. However, the hospital also needed to consider how to properly rehouse the elderly living in nearby nursing homes which were required to be relocated for redevelopment, so as to avoid the occurrence of unpleasant incidents. The SWD indicated at the EWC earlier that some elders held a wait-and-see attitude. He asked at what time the hospital required the Government Property Agency (GPA) to hand over the sites of relevant dormitories and nursing homes, when the preliminary works would be started and whether it would cooperate with other departments in assisting the affected residents to move to other elderly homes;
- (d) the paper pointed out that the redevelopment plan would provide different services but did not separate services provided in the first phase from those in the second phase. He asked which projects belonged to the services provided

in the first phase, which belonged to the second phase and whether more information could be provided after the meeting;

- (e) the hospital stated that it would draw up the project plan in accordance with the Hong Kong Planning Standards and Guidelines (the “HKPSG”) of the Planning Department. He understood that the HKPSG required 5.5 beds for every 1 000 people. He asked whether the medical services in the entire New Territories East met standards. Paragraph 3.2.2 of the HKPSG pointed out that when reserving land for hospital use, an area of 80m² should be reserved for every bed. This standard had calculated the required area for support services and related ancillary facilities such as parking lot, loading and unloading areas for passengers and cargos, etc. The 2006 paper pointed out that the ward area of PWH was 90m², higher than the standard set out in HKPSG. He asked about the relationship between these figures and 9m² for each bed after redevelopment mentioned by the hospital. He asked whether extra beds would be required after the completion of redevelopment because PWH often needed extra beds;
- (f) the hospital mentioned that a decanting building would be constructed at Sha Tin Hospital, but the document only mentioned this in a short paragraph and there was no picture for reference. He asked about the information and location of the decanting building, and whether it was included in the budget of \$30 billion. The decanting building might affect A Kung Kok Street, where many buses were passing by and therefore it was worrying; and
- (g) in his opinion, the consultation made by the hospital at this time was not fully prepared and the paper was simple. The hospital should learn a lesson from this experience and make improvements in the future.

33. The views of Mr YIP Wing were summarised below:

- (a) dust would be generated during the redevelopment process. He asked whether it would make the patients’ wounds more vulnerable to infection and affect the progress of rehabilitation; and
- (b) he asked the hospital whether there was any data to estimate the possibility of a serious shortage of beds in the future.

34. The views of the Chairman were summarised below:

- (a) he was concerned about the current arrangement of the bus station adjacent to PWH. At present, it was inconvenient to get on and off buses at the station and the station was not sheltered. In addition, there was still room for improvement. He asked the hospital whether it would work with the Transport Department to improve the station arrangement. He hoped that when compiling the assessment report, the hospital could incorporate the comments of members such as building a footbridge to connect MTR station and PWH;
- (b) the location of Phase II redevelopment was far from the station. He asked about the possibility of adding parking spaces for visitors to facilitate the public;

- (c) regarding data on shortening of waiting time for specialist out-patient services or accident and emergency services after redevelopment, details of construction costs and others, he hoped that the authority should prepare such data and provide it to members for reference in the future; and
- (d) he asked the hospital to provide the data and other supplementary information requested by members afterwards for reference.

35. Mr Simon WONG, Assistant District Officer (Sha Tin) responded that problems of the relevant documents might arise when filing and the Secretariat would pay attention to it. In the past, members had remarked on the manpower issue of the Secretariat on different occasions. The DO would examine the relevant situation and report it to the Home Affairs Department.

36. The responses of Dr. LO Su-vui, Cluster Chief Executive of New Territories East Cluster were summarised below:

- (a) in the 2016 Policy Address, the Government set aside \$200 billion for the HA to develop hospitals. In 2008, the head office began to design a blueprint for the entire PWH project by using the population figures projected by the Census and Statistics Department and the Planning Department. At present, there were 1 600 beds at PWH. After the completion of the first stage of Phase II redevelopment, 450 additional beds would be provided. Upon completion of the second stage of Phase II redevelopment, 400 extra beds would be provided, and there would be a total of 2 450 beds. The budget of the first stage works of Phase II redevelopment was not less than \$30 billion. It was initially expected to be completed in 2027, and an additional area of 2.6 million m² would be provided. The second stage works of Phase II redevelopment would provide an additional area of 200 000m² for clinical services. The \$30 billion included the cost of building of a decanting building at Sha Tin Hospital;
- (b) with regard to the manpower, the number of medical students had increased from 250 per year a few years ago to 420 at present, and retired senior doctors would be rehired. More than 200 nurses graduated every year and the government would hire them to provide services. As for pharmacists and radiotherapists, the number of places provided by the two medical schools had been increasing;
- (c) in the plan of in-situ reprovisioning, staff dormitory would be removed and the scope of clinical services would not be affected. There would be measures to reduce noise and dust in the process;
- (d) the area of hospital beds would be increased from the current 6.5m² for each bed to 9m² for each bed in the future. As for the parking spaces, as the area of the hospital was expanded, planning would be made based on the HKPSG of the Planning Department. After completion of the report by the consultant company, detailed information would be provided to the DC for further consultation;

- (e) if funding was successfully obtained from the Finance Committee of the Legislative Council, preliminary works, such as the demolition of dormitories and the commencement of investigation works, would start in July;
- (f) in respect of the nursing home located in Block E of the staff dormitory, the hospital had been closely communicating with the GPA and the SWD. In 2015, the hospital informed the GPA that it would resume the relevant site on 30 June 2017 and start the preliminary works in July. The GPA had also informed the residents of the dormitory (including nursing home) about the arrangements two years ago. He knew that the SWD had thorough communication with staff and elders of the nursing home;
- (g) regarding the waiting time at the Accident and Emergency Department, the hospital conducted close monitoring and no patients needed to wait for more than 12 hours to be arranged for beds and very few patients needed to wait for more than eight hours over the past one to two months;
- (h) he said that the relevant information would be provided to members after reviewing the 2006 documents. Regarding the bed area and planning guidelines, the hospital needed to spend more time on research;
- (i) the DC was an important stakeholder and the hospital was willing to further consult the DC in due course; and
- (j) regarding the vibration caused by the project, the hospital had different measures to monitor it and there was a certain distance between the project site and the operating theatre.

37. The responses of Prof Philip LI were summarised below:

- (a) all wards in the future would be “elderly friendly” wards. It was temporarily estimated that the clinical building of the Accident and Emergency Department would be moved to the first stage of Phase II redevelopment to increase the entire area of the Accident and Emergency Department and enhance the supporting facilities;
- (b) inside the building to be built at the first stage of Phase II redevelopment, there would be operating theatres and the area of the pharmacy would also increase. By then, suitable manpower would be arranged to shorten the waiting time. With the ageing of the population, it was expected that the number of patients suffering from some diseases, such as stroke and heart disease, would increase. In the future, the departments with functional relations but belonging to different specialties would be located within each other’s vicinity to strengthen their mutual collaboration. For example, neurosurgical and neurology divisions, nephrology and urology divisions, divisions of cardiac surgery and cardiology, divisions of hepatology and gastroenterology, divisions of gynecology and pediatrics would co-operate with each other to deal with related cases, hoping to alleviate the pressure on specialist out-patient clinics and shorten the waiting time by strengthening cooperation between specialties;

- (c) the services currently provided by PWH would not be affected during the construction. Later, the existing administrative departments of PWH would be moved to the decanting building at Sha Tin Hospital to vacate space for the retention of clinical services at PWH. Upon the completion of the redevelopment of PWH, the space of the decanting building would be reserved for providing services by Sha Tin Hospital. Some members expressed concern that after the relocation of the administrative departments to the decanting building, the efficiency would be affected. At that time, the hospital would take a series of measures, such as arranging shuttle bus service to pick up staff of PWH to and from the decanting building, to maintain operational efficiency. The hospital would later communicate with the headquarters and then provide members with supplementary information on the decanting building;
- (d) CU Medical Centre provided private hospital services to residents in the New Territories East; PWH remained the teaching hospital of the Faculty of Medicine, The Chinese University of Hong Kong, so large-scaled services, e.g. complicated surgery, would still be carried out at PWH;
- (e) after the completion of Phase II redevelopment, consideration would be given to integrating the Sleep Department to provide better services;
- (f) inpatient services for psychiatric patients in Sha Tin were now provided by Sha Tin Hospital. Upon completion of the first stage of Phase II redevelopment, wards would be provided to psychiatric patients with emergency conditions. The elderly dental department was temporarily not included in the service planning of PWH. As for offering washing rooms for family members of patients in the pediatric wards, although such washing room was not a kind of the facilities of HA for the time being, it could be considered in the planning;
- (g) at present, one of the staff dormitory buildings at PWH had been handed over to the GPA many years ago for rental purpose. In addition, some of them were used as callrooms for staff. After the relocation of administrative departments of PWH to the decanting building at Sha Tin Hospital, part of the vacated spaces would be used as standby rooms for staff;
- (h) regarding the waiting time at the Accident and Emergency Department, the hospital conducted close monitoring and no patients needed to wait for more than 12 hours to be arranged for beds and very few patients needed to wait for more than eight hours over the past one to two months;
- (i) the HA had indicated to the GPA that it hoped to resume the area in vicinity of the staff dormitory for preliminary work on 30 June 2017. He understood that the GPA had some preparatory works before handing over the site. Therefore, it was scheduled to take back the staff dormitory on 31 March;
- (j) in view of the vast area involved in this redevelopment project, if the building was put into use immediately after the two floors were completed and then continuing to build the remaining floors, the construction time required would be longer with limitations. As such, it was not regarded as a feasible solution

for the time being; and

- (k) the hospital was willing to communicate with DC Members. At present, the Hospital Governing Committee had been set up and Mr SIU Hin-hong was also a committee member. In addition, channels had been set up to discuss with patient organisations. The hospital planned to set up an online platform to disseminate the latest news in due time and to further consult the DC in due course.

38. The responses of Mr MUI Kui-chuen, Manager (Capital Projects) of HA were summarised below:

- (a) he was responsible for explaining the engineering problems. Since this was an in-situ redevelopment and the existing services should not be affected by the project, the relocation process would be quite complicated. Therefore, it was necessary to apply for funding of the first batch from the Legislative Council this year and the hospital would prepare the consultant report and preliminary works first, including demolition of some buildings for land investigation, and then carry out foundation works simultaneously, so that the project could be completed as soon as possible;
- (b) initial communication had been made with relevant departments on traffic and environmental issues, but a detailed study would be made after obtaining funding of the first batch from the Legislative Council, and then the hospital would engage a consultant company to compile an assessment report. The HA would initially consider setting up different channels for people and vehicles and separate the main entrance and the parking spaces for ambulances. Passengers might get on and off taxis in the middle;
- (c) the HA understood that noise and dust would be generated from the works. Therefore, clauses would be added to the project contracts to require engineering companies to reduce noise and dust during the works; and
- (d) the HA was concerned that noise and vibration might be generated from the works. As a result, the redevelopment would adopt bored piling instead of conventional piling methods as far as possible. Bored piling would reduce the noise and vibration generated during the construction, so that the project could meet the vibration standards that were acceptable to the hospital.

39. The Chairman proposed in the name of the HEC that the hospital should set up a liaison working group to consult the members and affected community members about their opinions.

40. Mr SIU Hin-hong said he did not oppose the Chairman's suggestion, but as he was a member of the Hospital Governing Committee, members could convey views to the hospital through him.

41. Mr CHIU Man-leong said that at present, working groups would be set up for some major projects, such as the construction of the third runway at the airport and the relocation of Sha Tin Sewage Treatment Works, so that stakeholders could remark on the problems caused by the project during the construction period. He hoped that the hospital should

seriously consider establishing such working groups.

42. Mr Michael YUNG agreed with the Chairman's suggestion on setting up a liaison working group to hold meetings so that the hospital could clarify the unanswered questions to members and provide more information.

43. Mr HO Hau-cheung considered Mr SIU Hin-hong was a representative figure since he joined the Hospital Governing Committee upon recommendation by the DC. He believed that it was best for the hospital to accept the advice to set up a liaison working group. However, if the hospital could not make a decision on whether to establish a liaison working group at this moment, it could organise the group through Mr SIU Hin-hong, or conduct further negotiation with the DC after the hospital submitted the supplementary information at the next meeting.

44. Mr YIU Ka-chun disagreed about organising a liaison working group by Mr SIU Hin-hong because of many uncertainties such as what resources to use, where and in what name to hold the meetings. As a well-established hospital, PWH had extensive experiences in handling the relationship with patients and there was no reason why the hospital could not establish a liaison working group. The advice given by the liaison working group would be conducive to the development of the hospital. Accordingly, he asked why the hospital's resources and networks could not be used to establish a liaison working group.

45. Dr LO Su-vui responded that the hospital attached great importance to the views of stakeholders and would consider carefully the setting up of a liaison working group after the meeting and gave a reply at the next meeting.

46. The Chairman said that after receiving the reply from the hospital at the next meeting, the DC would consider, as the case might be, whether to write a letter asking them to set up a liaison working group.

47. Ms YUE Shin-man proposed the provisional motion below:

“The Health and Environment Committee of Sha Tin District Council requests the government to actively study the plan to relocate the Colon Seminars and Family Medicine Teaching Clinic at the Jockey Club School of Public Health and Primary Care of The Chinese University of Hong Kong on the fourth floor as well as the clinical pathology laboratory centre on the fifth and sixth floors of the Lek Yuen Health Centre in Sha Tin to the new building in the Phase II expansion of Prince of Wales Hospital to make room for expansion of general out-patient services in Lek Yuen, Sha Tin, which will benefit the residents in Sha Tin.”

Mr WONG Yue-hon seconded the motion.

48. Members unanimously endorsed the provisional motion in paragraph 47.

49. Mr TING Tsz-yuen proposed the provisional motion below:

“The Health and Environment Committee of the Sha Tin District Council supports the implementation of the Phase II expansion project on the premise that the Hospital Authority will set up an ‘Expansion Project Liaison Group of Prince of Wales Hospital’.”

Mr Wilson LI seconded the motion.

50. The Chairman suggested changing “support” to “require”.

51. Mr YIU Ka-chun believed that it was inappropriate that the HEC would only support the redevelopment after the hospital had established the liaison working group. He believed that it should be explained during moving of the motion that a liaison working group must be set up within the redevelopment project plan.

52. Mr Wilson LI added that he respected the identity and role of Mr SIU Hin-hong, but the redevelopment of PWH was a huge project and many members hoped that the hospital would set up a liaison working group. Therefore, he seconded the motion proposed by Mr TING Tsz-yuen.

53. Mr TING Tsz-yuen revised his provisional motion below:

“The Health and Environment Committee of the Sha Tin District Council requires the Hospital Authority to establish an ‘Expansion Project Liaison Group of Prince of Wales Hospital’, so that the District Council can participate in the process of the Phase II expansion project.”

Mr Wilson LI seconded the motion.

54. Mr CHIU Man-leong suggested changing “DC” to “stakeholders”.

55. Mr TING Tsz-yuen revised his provisional motion below:

“The Health and Environment Committee of the Sha Tin District Council requires the Hospital Authority to establish an ‘Expansion Project Liaison Group of Prince of Wales Hospital’, so that the District Council and stakeholders can participate in the process of the Phase II expansion project.”

Mr Wilson LI seconded the motion.

56. Members unanimously endorsed the provisional motion in paragraph 55.

Questions

Question to be Raised by Ms YUE Shin-man on Extension of Out-Patient Service in Sha Tin District

(Paper No. HE 17/2017)

57. The views of Ms YUE Shin-man were summarised below:

- (a) the estimated population of Sha Tin would be 700 000-800 000 in 2024. She once personally went to the Lek Yuen General Out-Patient Clinic for medical consultation and it was pretty crowded there. The department replied that there was no plan to relocate the laboratory centre to PWH, which made her disappointed; and

- (b) given the continuous population growth, she believed that the services provided by general out-patient clinics in Sha Tin district were not enough. At present, it was very difficult for the public to make appointment for general out-patient services. The department responded that the lands reserved by the government in Sha Tin district were used for the long-term development of primary health care services. She hoped that the HA could explain it further.

58. The views of Ms TUNG Kin-lei were summarised below:

- (a) it was difficult for residents in Tai Wai to make appointment for Sha Tin (Tai Wai) general out-patient services. They could only make appointment for the general out-patient services provided by Lek Yuen General Out-Patient Clinic or Ma On Shan Family Medicine Center. It was very difficult for the elderly people to seek treatment in remote clinics; and
- (b) the fourth to sixth floors of the Lek Yuen General Out-patient Clinic were used for medical research and holding seminars and it would be more beneficial to residents if these floors were used for out-patient services.

59. Mr Tiger WONG said that the elderly population would increase by 66% over the next seven years. At present, some members of the public already remarked that it was very difficult to make appointment for the services of Lek Yuen General Out-Patient Clinic and Yuen Chau Kok General Out-patient Clinic. He hoped that the HA could actively consider adding outpatient facilities.

60. Prof Philip LI responded that the Cluster was not in a position to answer some questions on behalf of other relevant departments. However, the Cluster understood the situation of Lek Yuen General Out-Patient Clinic and public demand for general out-patient services. After July this year, the number of cases treated at general out-patient clinics of Sha Tin would be increased.

Question to be Raised by Mr HUI Yui-yu, Rick on Problem of Black Particles in Fresh Water

(Paper No. HE 18/2017)

61. The views of Mr Rick HUI were summarised below:

- (a) since the incident of asphalt in fresh water occurred, he noticed that the Water Supplies Department (WSD) staff had tried their best to deal with it. A mechanism had also been set up to allow the affected households to claim compensation;
- (b) the WSD said it would first replace and repair a section (from Sha Tin Water Treatment Works to Tin Sam Street) of steel fresh water pipe with a diameter of 800 mm at Che Kung Miu Road. The works were expected to be completed in early 2018. The remaining aged pipes at Che Kung Miu Road would be replaced and repaired successively. He asked whether the asphalt problem could be completely resolved after the works had been completed, and the public would not be bothered by the particles in fresh water;

- (c) some households were still affected by asphalt in fresh water. He knew that the WSD had a hotline to enable the public to make appointments with the WSD staff to deal with the problem. He asked about the handling procedures and the possibility of free installation of water filters for affected households;
- (d) affected residents could claim compensation through the mechanism and many affected households had installed the water filters by themselves to resolve the problem. He asked whether these households could claim compensation from the WSD for the costs of purchasing and installing water filters by themselves; and
- (e) in his opinion, there was a need to urge the WSD to submit a report on the structure and status quo of the water supply network of Sha Tin District and inform the HEC about which pipes had the asphalt protection layers and the history of pipes.

62. The views of Mr PUN Kwok-shan were summarised below:

- (a) the WSD documents were a little bit simple. When following up the issues with the WSD staff previously, the WSD was advised to optimise the water strainer commonly known as “sand filter”. He asked if the WSD could give priority to replacement of the water strainers for the affected households;
- (b) although the WSD said fresh water containing particles was drinkable, many citizens were wondering whether there would be sequelae after drinking;
- (c) some residents would like to know about the WSD’s compensation given to them if there was a problem with their water heaters, washing machines and other equipment due to particles in the fresh water;
- (d) the WSD said that it would replace and repair a section (from Sha Tin Water Treatment Works to Tin Sam Street) of steel fresh water pipe with a diameter of 800 mm at Che Kung Miu Road. He asked about whether the WSD would install centrifuges and whether it could provide more information on repairing of the water pipe connecting Tin Sam Street;
- (e) he hoped that the WSD would provide details of the Rehabilitation Programme of Water Mains of Sha Tin District; and
- (f) the WSD pointed out that the households were required to provide supporting documents for claiming compensation and he asked whether the households were required to hire experts to prepare documents before claims could be lodged. He asked if the WSD would provide claims instructions for households.

63. The views of Mr HO Hau-cheung were summarised below:

- (a) he had been following up the incident together with Mr PUN Kwok-shan and Ms LAM Chung-yan since the incident took place in last November. The WSD had taken a series of remedial measures and it deserved recognition. However, from his point of view, he did not wish that the department only

provided remedial measures, but should also come up with some ways to avoid repeating the same mistake. This incident reflected the crisis in Sha Tin. If the WSD continued to deal with the incident based on the established principles, the WSD could also not guarantee that similar incidents would not happen in the future again;

- (b) he asked the WSD how many water pipes had been repaired in Sha Tin District and how many more were to be repaired. He hoped that the WSD could provide the data after the meeting;
- (c) he asked whether the WSD could ascertain which pipe was in the worst position among the non-rehabilitated pipes and whether it would adjust the rehabilitation programme to give priority to the handling of high-risk pipes;
- (d) ageing rate of pipes was faster than expected. He asked how the WSD would expedite rehabilitation works and expeditiously replace all aged pipes in Sha Tin District; and
- (e) he asked how the WSD would strengthen the monitoring of water pipes, water quality and water supply systems after the incident; how it would speed up the adoption of emergency measures after the accident; and how it would predict when problems would arise in the water pipes. Apart from particles in fresh water, the burst of water pipes was also worrying.

64. The Chairman requested the WSD to provide the relevant data and supplementary information at the next meeting for members' reference. He said that Mr Alvin LEE had arrived at the conference room and suggested cancelling his application for leave of absence.

65. Members unanimously endorsed the cancellation of Mr Alvin LEE's application for leave of absence.

66. The responses of Ms Mable LAM, Senior Engineer / Consultants Management (3) of WSD were summarised below:

- (a) since the aged water pipe was a trunk pipe in Sha Tin, if the entire water pipe concerned ceased operation at the same time, it would affect the water supply in the entire Tai Wai District. Therefore, rehabilitation should be carried out in phases. A section (from Sha Tin Water Treatment Works to Tin Sam Street) of steel fresh water pipe with a diameter of 800 mm at Che Kung Miu Road would be replaced and repaired first of all at the beginning of next year. After the completion of works for this section, fresh water could flow through the rehabilitated main water pipe and then be distributed to the estates along Hin Keng Street and Tin Sam Street, including Hin Keng Estate, Lung Hang Estate and Carado Garden, via the existing branch pipes. Afterwards, the WSD would continue to replace the remaining main water pipes along Che Kung Miu Road. The WSD was now studying the most suitable water pipe replacement programme. One of the possible solutions was to lay new trunk pipe along Tin Sam Street. The WSD would continue to discuss with relevant DC Members about the feasibility of the programme. After all the works were completed, the trunk pipes with potential problems in the water supply network of Tai Wai District would be replaced.

67. The responses of Mr LAM Kwok-chuen, Senior Engineer (Acting) / New Territories East (2) of WSD were summarised below:

- (a) upon receiving help requests from the public, the WSD would dispatch staff to inspect the water meter for the concerned household. If there was any problem, the water meter would be washed or replaced with a new water meter;
- (b) if individual households held that they suffered losses as a result of this accident, they might write to the WSD and enclose supporting documents, such as listing the monetary losses involved in the incident, for claiming compensation. After consulting legal advice, the WSD would reply to the households about the claims;
- (c) among the affected estates in Sha Tin South, centrifuges would first be installed in Carado Garden. Due to the relatively large size of the equipment, the WSD was now looking for suitable locations for installation. The WSD had installed water strainers in various estates in Sha Tin South and centrifuges would be installed if necessary. After the completion of the trunk pipe rehabilitation project, the new pipes would no longer use asphalt protection layers;
- (d) the WSD was aware of the inconvenience caused to members of the public in Tai Wai District and he apologised to members of the public in Tai Wai District on behalf of the WSD. The WSD believed that the reason was that the water supply of the trunk water pipe was suspended previously and the sediment in the water pipe was washed away when the water supply was resumed. The WSD would review and optimise the procedures for resuming water supply. Before the commencement of major rehabilitation works, if the WSD estimated that the project might lead to particles in fresh water, water strainers would be pre-installed;
- (e) the WSD had information on the ageing of water pipes and would review the priority of rehabilitation of water pipes with relevant departments; and
- (f) after carrying out water pipe replacement/rehabilitation programmes for more than a decade, the WSD had completed the replacement or rehabilitation of about 176 kilometers of water pipes in Sha Tin District, equivalent to 99% of the distance covered by the works contract. Apart from the Che Kung Miu Road project, the WSD was expected to complete the remaining water pipe projects by the end of June this year. Upon completion of the rehabilitation programme, the WSD would continue to inspect the status of water pipes and follow up timely.

68. Mr Rick HUI proposed the provisional motion below:

“The Health and Environment Committee of the Sha Tin District Council requests the WSD to provide free installation of domestic water filters for residents still affected by asphalt and to submit a report on the current status of the Shatin District water pipe network to the District Council.”

Mr LAI Tsz-yan seconded the motion.

69. Members unanimously endorsed the provisional motion in paragraph 68.

70. Mr PUN Kwok-shan proposed the provisional motion below:

“Recently, the contamination incident of black particles in Festival City, Carado Garden and Tin Sam areas in Tai Wai has once again proved that the ageing problem of water supply system in Sha Tin is rather serious. The current water pipe replacement project is very likely to lag far behind the ageing rate of water pipes.

The Health and Environment Committee of the Sha Tin District Council strongly requests the WSD to allocate additional resources to conduct a thorough review on the water supply system in Sha Tin as a whole and give priority to the rehabilitation of high-risk aged pipes. Meanwhile, the WSD should also speed up the ongoing water pipe replacement project and set up stringent water quality monitoring devices and measures to prevent the recurrence of similar incidents and further impact on the health and daily life of the public.”

Mr CHIU Man-leong seconded the motion.

71. Members unanimously endorsed the provisional motion in paragraph 70.

Question to be Raised by Mr TING Tsz-yuen on Tobacco Control on the Footbridge connecting Bayshore Towers and Ma On Shan Park
(Paper No. HE 19/2017)

72. The views of Mr TING Tsz-yuen were summarised below:

- (a) he praised the Food and Environmental Hygiene Department (FEHD) for quickly removing the cigarette butt collection box after receiving comments. He asked the Tobacco Control Office (TCO) of the Department of Health whether a venue with a degree of enclosure of lower than 50% of the total area on all sides could not be designated as a non-smoking area. He asked if a footbridge with a degree of enclosure of lower than 50% could be designated as a non-smoking area to reduce the impact of secondhand smoke on pedestrians; and
- (b) regarding the review on coverage, he asked whether the TCO had any specific improvement plan and timetable.

73. The views of Mr Wilson LI were summarised below:

- (a) many citizens complained about smoking problems at the footbridges near Ma On Shan MTR Station and Wu Kai Sha MTR Station, including the footbridges connecting Bayshore Towers and Ma On Shan Park and the footbridge connecting Double Cove and Wu Kai Sha MTR Station. The smokers were mainly real estate agents and engineering staff. He had been communicating with the relevant departments to follow up the issue, but the problem was still not thoroughly resolved. Wu Kai Sha MTR Station would see the commencement of a number of real estate projects and it was expected

that the problem would be more serious. Although he understood the needs of the real estate agents and engineering staff, the problem of smoking had a significant impact on the residents in the neighboring areas and hoped that the department would further consider the inclusion of footbridges into non-smoking areas; and

- (b) although the Public Transport Interchange at Wu Kai Sha was a non-smoking area, many people gathered there for smoking; he hoped that TCO would strengthen law enforcement and the FEHD would intensify its efforts in cleansing.

74. The views of Mr Alvin LEE were summarised below:

- (a) he had been following up the issue of the smoking ban on the footbridge connecting Bayshore Towers and Ma On Shan Park for many years. His report to the TCO, FEHD and Highways Department each time had been dealt with. However, due to the restrictions in legislation, the problem could not be thoroughly resolved. He considered that the current Smoking Ordinance had been out of date, since the Ordinance had not been reviewed and optimised so far from its enactment in 2007; and
- (b) he had sent a letter to the Under Secretary for Food and Health Bureau (FHB), hoping that the FHB would review the existing ordinance. He hoped that the new term of SAR government would enact a thorough legislation on the Smoking Bill, so that the law enforcement agencies could exercise their duty in accordance with the law. He urged the department to report to the FHB that the Ordinance should be reviewed as soon as possible so that smoking on the footbridges in Hong Kong could be banned completely.

75. The responses of Mr YU John, Executive Officer I (Enforcement) 1 of TCO of Department of Health were summarised below:

- (a) members had a certain understanding of the Smoking (Public Health) Ordinance (“Ordinance”). At present, the TCO could only perform enforcement duties in non-smoking areas as defined by the Ordinance. They would relay the views of members, e.g. designating footbridges as non-smoking area, to the Department of Health and FHB; and
- (b) the government had been working hard to optimise the Ordinance. For example, bus interchanges at the entrances of the eight tunnels had been incorporated into non-smoking areas since 31 March 2016 and law enforcement efforts had also achieved some success.

76. Mr Eric TSAI, District Environmental Hygiene Superintendent (Sha Tin) of FEHD responded that the department had been following up with members on the issue of smoking on two footbridges connecting Bayshore Towers and Double Cove. The FEHD would continue to strengthen the cleansing services and step up prosecution action.

Question to be Raised by Mr YIU Ka-chun on Provision of Sewerage Systems for Kwun Yam Shan Village and Mui Tsz Lam Village
(Paper No. HE 20/2017)

77. The views of Mr YIU Ka-chun were summarised below:

- (a) despite many people were concerned about the sparsely-populated villages such as Kwun Yam Shan Village and Mui Tsz Lam Village, improvement was not noticeable. When villagers applied for the construction of small houses, the applications were either delayed or rejected because of sewerage problems. The Environmental Protection Department (EPD) had launched the sewage treatment project in Sha Tin many years ago to promote the sewerage works for different villages in Sha Tin and to transform the old septic tanks and improve rural hygiene. All residents wanted to know when the sewerage systems could be provided for Kwun Yam Shan Village and Mui Tsz Lam Village; and
- (b) some documents indicated that after the commencement of the relevant works, the Government would expeditiously conduct an engineering and planning study on the remaining areas where no sewage facilities were installed in the district. Ms TUNG Kin-lei raised a question in 2012 and EPD staff responded at that time that feasibility studies on public sewerage facilities in 28 areas had been conducted and the feasibility report was expected to be completed within one year. At that time, 28 rural areas were not included in the public works programme. The consulting company conducted a study to explore the feasibility of providing public sewerage facilities. He asked about the conclusions of the feasibility report, which villages could start works and which villages still had to wait. He asked if the result of the report could be provided after the meeting and whether the report would provide a clear direction as to whether and when the construction would be commenced.

78. The views of Mr Michael YUNG were summarised below:

- (a) according to the EPD's paper in 2012, rural sewerage connection works had been completed in 34 rural areas in Sha Tin District and there were seven works in progress. At this time, the departmental paper replied that works were undergoing in seven areas under the construction contract. He asked about the six villages where sewerage connection works were completed in 2013. According to the 2012 paper, there were 13 rural areas under planning and 28 rural areas which were not included in the public works programme. He asked about the progress and treatment in these rural areas;
- (b) as for the old village area in Tai Shui Hang Village, some newly-built houses could not be connected to the sewers because their alignments were different from that of the main drain. Once the septic tank used by some houses was full, it would lead to grave consequences to low-rise households. He understood that some houses were not connected to the sewers of the Drainage Services Department (DSD) but asked whether the DSD could send dedicated staff to help these households deal with and study the problem of sewerage connection; and

- (c) there was no sewerage connection in remote villages; water quality could not be guaranteed; and septic tank leakage had an impact on the quality of fresh water. He asked whether other technologies could be considered, such as setting up integrated septic facilities or small-scaled sewage treatment plants to resolve the problem.

79. The responses of Mr LAI Kwai-cheung, Senior Engineer / Kowloon and New Territories South 1 of DSD were summarised below:

- (a) if the residents concerned had any doubt about the sewer connection, they could contact the DSD and they would try their best to provide advice as far as they knew. In the early years, some residents contacted the DSD and after the DSD gave its opinion, the residents decided to pay the DSD for disposal and eventually the problem was resolved;
- (b) as for the progress of the sewer connection project in rural areas, supplementary information would be provided for reference after the meeting; and
- (c) the public could also view the distribution of sewage and storm drains through the online system GeoInfo Map of the Lands Department (<http://www1.map.gov.hk/gih3/view/index.jsp>) to conduct a preliminary assessment on the sewer connection.

80. The responses of Mr SHIU Ying-kei, Environmental Protection Officer (Sewerage Infrastructure) 61 of the EPD were summarised below:

- (a) in general, the EPD would decide on the priorities of the projects according to different situations and then start the project planning based on the overall sewage collection plan after the consultant gave its advice;
- (b) in the review of sewerage schemes in Sha Tin and Tai Po, the department would conduct effective screening to ensure cost-effectiveness and technical feasibility;
- (c) based on the consideration for the entire area, the EPD would set up facilities such as septic tanks before the implementation of the sewerage system in rural areas. In Tolo Harbour area, projects had been completed or were undergoing in about 110 villages. About 30 villages were included in the public works programme and the relevant legal proceedings were undergoing; and
- (d) in 2014, the EPD reviewed the situation of Kwun Yam Shan Village and Mui Tsz Lam Village. At that time, Kwun Yam Shan Village had about 34 houses and Mui Tsz Lam Village had about 17 houses. At present, the EPD concentrated its resources on handling the villages that had been included in the public works programme before conduct planning for the remaining villages. Newly developed areas should comply with the relevant regulations of the Planning Department. Residents should be liable for disposing sewage at their own expense if there was no drain in their villages.

Question to be Raised by Mr YUNG Ming-chau, Michael on Nuisance caused by Dogs
(Paper No. HE 21/2017)

81. The views of Mr Michael YUNG were summarised below:

- (a) a resident living in Chevalier Garden remarked that he/she was disturbed by dog barking in the early morning. Pursuant to the existing legislation, there was not much cooperation between departments in some aspects. For example, although Chapter 139B Public Health (Animals and Birds) (Animal Traders) Regulations of the Laws of Hong Kong regulated the basic enclosure within licensed premises, this regulation applied only to animal traders, but could not extend to protection of the animals sold. He asked whether there were any benchmarks at present about the size of space that private dog owners should provide for dogs;
- (b) the Hong Kong Police Force (HKPF) responded that feeding dogs for anti-theft purposes should be based on the principle of not disturbing others. Use of muzzles on dogs did not necessarily mean losing the effectiveness of security. He asked how the dogs did not lose the effectiveness of security after being muzzled as they could not bark and protect themselves. Section 8 of Prevention of Cruelty to Animals Regulations (Cap. 169A) required that all animals be provided with a constant and adequate supply of clear fresh water. He asked whether use of muzzles on dogs constituted a breach of this regulation since dogs could not drink water; and
- (c) in reply to the complainant about the dog barking, the HKPF said that they would advise the dog owners to put muzzles onto their dogs, but now they said that the dogs could still bark after being muzzled, which was self-contradictory.

82. Mr SIU Hin-hong said that he had dealt with the dog barking at the hill with the Agriculture, Fisheries and Conservation Department (AFCD). The officers of AFCD would take dogs without chips away. If the dogs had chips, the officers would remind the dog owners of proper control over their dogs. If there was any further complaint, the officers of the AFCD would go to the site again to remind the dog owner, who would control the dog(s) in a self-disciplined manner because he/she did not want frequent visits by the officers.

83. The Chairman suggested that the HKPF should contact Mr Michael YUNG about follow-up of the case after the meeting.

84. Mr Johnny WONG, Patrol Sub-Unit 3 Commander / Ma On Shan Division of HKPF responded that whether the dogs would lose their security effectiveness after being muzzled depended on the design of the muzzles. If the muzzles were too tight, it might constitute animal abuse. If the muzzles were not too tight, dogs could still bark. In addition, the police did not advise the dog owners to use muzzles on their dogs all day long.

85. The responses of Mr WU Ho-wan, Senior Field Officer (Animal Management) (Acting) / Development 3 of AFCD were summarised below:

- (a) the Public Health (Animals and Birds) (Animal Traders) Regulations (Cap. 139B) governed animal traders. In respect of animal welfare, there were other

legislations for governing. For example, Prevention of Cruelty to Animals Regulations (Cap. 169A) included guidelines for the definition of animal cruelty and offenders were liable to a maximum penalty of \$200,000 and imprisonment for three years. In addition, the Rabies Ordinance (Cap. 421) required dog owners to arrange injections for their dogs; and

- (b) the Noise Control Ordinance (Cap. 400) applied to nuisance caused by noise made by dogs.

86. Mr CHAU Wai, Senior Environmental Protection Officer (Regional North) 4 of the EPD responded that the police was responsible for the enforcement of the Noise Control Ordinance (Cap. 400). The Ordinance emphasised that issues should be dealt with in a reasonable manner. For example, as far as he knew, if a resident received complaints for feeding dog(s) in the estate, the dog owner would be advised to put the dog(s) in the room so as to prevent the dog(s) from barking because of hearing the noise outside. If the dog owner failed to manage his/her dog(s) properly, he/she would be banned from feeding dogs.

Information Papers

Statistical Overview of Sha Tin District Environmental Hygiene Service (as at 31 January 2017)
(Paper No. HE 22/2017)

87. Members noted the above information paper.

Other Items

88. The Chairman said that the Working Group on Environmental Protection, Cleanliness and Hygiene in Sha Tin under the HEC would set up a booth at the Hong Kong Flower Show 2017 held on the weekends from 10-19 March 2017. Members were welcomed to visit the booth on those dates.

Date of Next Meeting

89. The next meeting was scheduled to be held at 2:30 pm on 11 May 2017 (Thursday).

90. The meeting was adjourned at 6:59 pm.

Sha Tin District Council Secretariat
STDC 13/15/40

March 2017