

**APPLICATION FOR PERMISSION**  
**UNDER SECTION 16 OF THE TOWN PLANNING ORDINANCE**

**APPLICATION NO. A/KC/451**

- Applicant** : Architectural Services Department (ArchSD) represented by Urbis Limited
- Site** : 3-15 Kwai Chung Hospital Road, Kwai Chung
- Site Area** : 49,235m<sup>2</sup> (about)
- Land Status** : Government Land Allocation No. KT 1043 (part)
- Plan** : Draft Kwai Chung Outline Zoning Plan (OZP) No. S/KC/29 (currently in force)
- Draft Kwai Chung Outline Zoning Plan (OZP) No. S/KC/28 (in force at the time of submission. The zonings and development restrictions for the site remain unchanged on the current OZP)
- Zoning** : “Government, Institution or Community” (“G/IC”)  
- maximum building height (BH) of 110mPD, or the height of the existing building, whichever is the greater
- Application** : Proposed Minor Relaxation of Building Height Restriction for Kwai Chung Hospital Redevelopment

**1. The Proposal**

- 1.1 The applicant seeks planning permission for the minor relaxation of building height restriction (BHR) from 110mPD to 120mPD to facilitate the proposed redevelopment of Kwai Chung Hospital (KCH) (Phases 2 & 3) at the application site (the Site), which falls within an area zoned “G/IC” on the draft Kwai Chung OZP No. S/KC/28 in force at the time of submission. The zonings and development restrictions for the application site remain unchanged on the current OZP No. S/KC/29 (**Plan A-1**). Since the proposed hospital redevelopment with a maximum BH of 120mPD would exceed the BHR of 110mPD as stipulated on the OZP, planning permission from the Town Planning Board (the Board) for the minor relaxation of BHR is required.
- 1.2 According to the applicant, the proposed redevelopment of KCH will be developed by phased demolition of existing hospital buildings. It comprises five new tower blocks in total with four 11-storey Blocks (B, C, D, and E) and one 6-storey Block (F) with proposed BH not exceeding 120mPD at the main roof (**Drawing A-1**)<sup>1</sup>.

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<sup>1</sup> The proposed redevelopment of KCH comprises three phases. Phase 1 covers Block A where the proposed BH is within the BHR stipulated on the OZP and not included in the subject application, and has

The proposed development will provide 1,000 bed spaces and ancillary facilities, including 96 consultation rooms, management office, integrated medical related services, supporting and recreational facilities, pharmacy store, call centre, information technology centre, cafeteria/dining area, outdoor landscape areas with ancillary facilities and car parking spaces. The submitted scheme is indicative in nature for the purpose of illustrating that the proposed increase in BH would have no adverse impacts on visual quality, air ventilation, traffic and infrastructural provision. The future development may be modified during detailed design stage.

- 1.3 The proposed redevelopment of Phase 1 has already commenced in 2016 tentatively for completion in 2018. It acts as a ‘decanting building’ to facilitate phased development and would eventually be handed back to Princess Margaret Hospital (PMH). Phase 2 will comprise demolition of all existing buildings of KCH except Block L/M & J and subsequent in-situ construction of four hospital blocks (Block B, C, D & E), targeted to commence in 2018 for completion in the 1st Quarter of 2021. Phase 3 will comprise demolition of Block L/M for in-situ construction of a podium garden and a small block (Block F), targeted to commence in the 3<sup>rd</sup> Quarter of 2021 for completion in the 2<sup>nd</sup> Quarter of 2023. With a formation level of about 68.3mPD (**Drawing A-2**), the proposed redevelopment of Blocks B to E will have a BH of about 51.1m which results in a maximum BH of about 120mPD. Block F will have a BH of about 28.3m which results in a maximum BH of about 100mPD and is within the BHR on OZP. A comparison of the existing and proposed building layout is at **Plan A-6**.
- 1.4 The proposed Master Layout Plan (MLP), floor plans and sections plans of the indicative scheme submitted by the applicant are shown at **Drawings A-1 to A-30**. Key development parameters and major floor uses are shown in Section 3.1 of the Supporting Planning Statement (SPS) at **Appendix Ia** which are summarised as follows:

Site Area	About 49,235m <sup>2</sup>
Proposed Plot Ratio (PR)	About 2.3
Proposed Gross Floor Area (GFA)	About 113,006m <sup>2</sup>
Proposed Site Coverage (SC)	About 29%
No. of Blocks	5
Building Height (BH)	
Blocks B,C,D,E	About 120mPD
Block F	About 100mPD
No. of Storeys	
Blocks B,C,D,E	11 storeys (excluding 2 levels of basement)
Block F	6 storeys (excluding 2 levels of basement)
No. of Bed Spaces	About 1,000
Transport Facilities	
<u>Parking Spaces</u>	
- Private Car	259 (including 5 accessible car parking spaces)
- Motorcycle	14
<u>Loading/Unloading (L/UL)</u>	
- Ambulance	3
- Rehab Bus	2
- Large Vehicles	2
- Emergency/Operational Vehicles	1
Public Open Space	15,238 m <sup>2</sup>

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already commenced. Phases 2 and 3 cover Blocks B to F where Blocks B to E would require minor relaxation of BHR from 110mPD to 120mPD.

Major Floor Uses <u>Blocks B, C, D &amp; E</u> G/F 1/G to 3/F 4/F to 9/F 10/F <u>Block F</u> G/F 1/F to 3/F 4/F to 5/F	Lift lobby, call centre and staff common facilities Ambulatory and medical facilities Wards Offices  Lift lobby Ambulatory and medical facilities Wards
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1.5 In support of the application, the applicant has submitted the following documents:

- (a) Application form received on 24.10.2017 **(Appendix I)**
- (b) Applicant's letter received on 24.10.2017 enclosing the Supporting Planning Statement (SPS) **(Appendix Ia)**
- (c) Further information (FI) received on 20.11.2017 providing replacement pages of Environmental Assessment (EA) Study and Sewage Impact Assessment (SIA)  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix Ib)**
- (d) Letter dated 8.12.2017 requesting for deferment **(Appendix Ic)**
- (e) FI received on 14.12.2017 providing response to departmental comments with replacement pages of SIA and Geotechnical Planning Review Report (GPRR)  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix Id)**
- (f) FI received on 20.12.2017 providing response to departmental comments with technical clarification to Air Ventilation Assessment (AVA)  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix Ie)**
- (g) FI received on 12.1.2018 providing supplementary floor plans  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix If)**
- (h) FI received on 23.1.2018 providing a supplementary Expert Evaluation (EE) of AVA  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix Ig)**
- (i) FI received on 9.2.2018 providing replacement pages of GPRR, AVA and architectural drawings  
*[Accepted and to exempt from publication and recounting requirements.]* **(Appendix Ih)**
- (j) FI received on 20.2.2018 providing response to departmental comments with replacement pages of SPS, **(Appendix Ii)**

section plans and layout plans  
*[Accepted and to exempt from publication and  
 recounting requirements.]*

- (k) FI received on 23.2.2018 providing clarification statement (**Appendix Ij**) and replacement pages of section plans and photomontage  
*[Accepted and to exempt from publication and  
 recounting requirements.]*

1.6 The application was originally scheduled for consideration by the Committee of the Board on 22.12.2017. On 22.12.2017, the Committee agreed to defer making a decision on the application for one month as requested by the applicant in order to allow sufficient time for preparation of FI to address the departmental comments. The applicant submitted FI on 20.11.2017, 14.12.2017, 20.12.2017, 12.1.2018, 23.1.2018, 9.2.2018, 20.2.2018 and 23.2.2018 (**Appendices Ib and Id to Ij**) in response to departmental comments. The application is scheduled for consideration by the Committee at this meeting.

## 2. **Justifications from the Applicant**

The justifications put forth by the applicant in support of the application are detailed in Section 4 of the SPS at **Appendix Ia** and the FI at **Appendices Ib and Id to Ij**, which are summarised as follows:

### In Line with Planning Intention and Compatible with Surrounding Environment

- (a) With respect to the existing site formation level of about 68.3mPD, the proposed minor relaxation of BH of about 10m represents only about 10% increase of the existing BH of the KCH, which will not cause any incompatibility in terms of the existing BH profile within the surroundings of the Site.

### Meeting the Increasing Demand for Psychiatric Services

- (b) The application is consistent with the policy initiative of the Chief Executive announced in the recent Policy Addresses regarding the enhancement of healthcare services in Hong Kong which include KCH.
- (c) The hospital has not undergone any major renovation or refurbishment since it was opened. The existing dilapidated building condition and outdated medical facilities of KCH are not conducive to the provision of high-quality psychiatric services for the patients. There is a need for redevelopment, otherwise it would compromise the service quality and safety with the issues of ward overcrowding, wards with mixed age and gender, insufficient space for delivery of ambulatory services and infection control.
- (d) According to the projection, the total population of the Kowloon West Cluster area will reach 2,012,900 in 2024. It is also anticipated that the percentage of elderly population will increase from 16% in 2014 to 23% in 2024. As such, the need for psychiatric service will further increase. The proposed redevelopment of KCH with minor relaxation of BHR can provide the much-needed upgraded facilities for more effective psychiatric health services to meet the increasing demand.
- (e) The prime objective of the redevelopment of KCH is to modernize the existing

outdated, heavily utilized, overcrowded and dilapidated facilities and to cope with the evolving model of care and delivery of patient-centered and community-based services to the society. The redevelopment of KCH is guided by a clinical services plan published by Hospital Authority (HA) in 2013, which also set out the capacity planning based on demand modelling techniques to determine the future bed requirement. Using 2010 as base year, the projection modelled up to year 2026 and taking into account the population growth, demographic changes, age- and disease-specific service utilisation rates, and anticipated impact with the service model shifting from in-patient care to community-based care, the projection results showed that around 1,000 beds would be required in KCH in 2026 in order to cope with the service demand. The delivery of 80 additional beds upon completion of the redevelopment is consistent with the deliverables committed in the 10-years Hospital Development Plan endorsed by Government in 2016.

### Site Constraints

- (f) The Site is accessible from Lai King Hill Road through a set of access ramps running through western part of the Site. There are well vegetated slopes on the northern part of the Site. Hence, the remaining buildable area is very limited and adjustment of building footprints is restricted due to the fact that large amount of site area is existing slopes, and also constrained by the land requirement of the new road network around the Site. Other design options have been explored to pursue the redevelopment by adhering to the current BHR, a large extent of excavation will be involved. As such, the redevelopment can only make use of the remaining areas within the Site.

### General Design Concepts and Merits

- (g) The additional BH will enable a building design which can improve patients' environment by better daylight penetration into the wards (window allowed for both sides of wards), enable better design flexibility in terms of internal layout to meet the operation need of the hospital, and thus improve operation efficiency. Each ward should be served by supporting facilities, e.g. corridors and lift cores. The proposed scheme has less wards on each floor (6 storeys with 4 wards per floor), compared to the OZP compliant scheme (4 storeys with 6 wards per floor) (**Drawings A-6 to A-7**), therefore less space required for internal circulation such as corridors and lift cores on each floor. It would also enable a more slender floor plate at the upper floors which provides more natural light penetration into the interior. Furthermore, the recess of the upper floors would provide spaces for podium gardens to be enjoyed by the patients/visitors. The total area of ward gardens at various floors is similar for both schemes. All these design elements may create a better therapeutic environment, which is particularly important for psychiatric patients.
- (h) The general landscape design concept is to provide a design responsive to the existing site context and the proposed hospital extension. The design aims to create safe, function and aesthetic landscape spaces around, within and on the hospital extension, which can provide for the circulation and passive recreation of staff, patients and visitor.

## No Adverse Impacts

### *Traffic Impact*

- (i) The Traffic Impact Assessment (TIA) concludes that there will be no adverse traffic impact on the road networks arising from the proposed redevelopment. The identified local key junctions will perform satisfactorily with ample reserve capacities in the design year of 2027.

### *Visual and Air Ventilation Impact*

- (j) A Visual Impact Assessment (VIA) and an AVA have been conducted for the proposed development. The VIA concludes that the visual impact significance of the proposed development is considered to be slightly adverse. The negative visual impacts to the identified key public viewing points will be reduced by mitigation measures including the provision of compensatory tree planting and amenity landscape areas. The AVA concludes that the proposal is unlikely to have adverse wind impact on pedestrian level ventilation performance.

### *Landscape Impact*

- (k) For better tree preservation and peripheral site boundary treatment, existing trees are retained where possible along the site boundaries to provide screening and greening.

### *Environmental Impact*

- (l) The EA concludes that with appropriate mitigation measures including adoption of regular watering and erection of noise barrier/enclosure, no insurmountable environmental problems in relation to air quality, noise, water quality and waste management are anticipated. Regarding the air quality, no major activities have been identified during the construction and operation phases of the proposed development that will cause any off-site adverse air quality impacts. On noise aspect, the predicted levels at all Noise Sensitive Receivers (NSRs) are found to comply with the noise criteria stipulated in the planning and statutory for operational noise impact. For water quality aspect, the sewage and wastewater will be collected and discharged to the public sewage system to be constructed prior to occupation of the units. For waste management aspect, implementation of the recommended site practices would reduce the impacts in related to the management, handling and transportation of waste generated during the construction and operational phases.

### *Ecological Impact*

- (m) Based on the Ecological Impact Assessment (EcoIA), the ecological value of the Site is generally low. Hence no adverse impacts on habitats or species would be resulted in the absence of mitigation measures.

### *Other Technical Impacts*

- (n) The SIA, Drainage Impact Assessment (DIA) and GPRR conclude that no unacceptable impact will arise from the proposed redevelopment of KCH on sewerage, drainage and geotechnical aspects. The GPRR indicates that further

investigations would be carried out to review the stability of the existing geotechnical features.

**3. Compliance with the “Owners’ Consent/Notification” Requirements**

As the application site involves Government land only, the “owner’s concern/notification” requirements as set out in the Town Planning Board Guidelines on Satisfying the “Owner’s Consent/Notification” Requirements under Sections 12A and 16 of the Town Planning Ordinance (TPB PG-No.31) is not applicable to the application.

**4. Previous Application**

There is no previous planning application at the Site considered by the Board.

**5. Similar Application**

There is no similar application for minor relaxation of BHR for ‘Hospital’ use within the “G/IC” zone in the Kwai Chung OZP area.

**6. The Application Site and Its Surrounding Areas (Plans A-1 to A-3 and Photos on Plan A-4 to A-5)**

6.1 The Site is:

- (a) located at the northwest portion of the hospital cluster which includes KCH and Princess Margaret Hospital (PMH) and is accessible via Lai King Hill Road along its western boundary;
- (b) located on a sloping area with platforms at various levels at around 68.3mPD; and
- (c) situated at a prominent location which could be viewed from Tsing Kwai Highway and Kwai Chung.

6.2 The surrounding areas have the following characteristics:

- (a) located in a predominately low-to-medium rise “G/IC” cluster with
  - (i) PMH to its south (including Block G and S with an existing BH of 124mPD and 147mPD<sup>2</sup> respectively);
  - (ii) Fire Services Department Workshop (Kwai Chung) and PMH School of General Nursing & Quarters to its west and southwest respectively; and
  - (iii) Lai Chi Kok Service Reservoir, Lai King Correctional Institution, Care and Attention Homes of Yan Chai Hospital, Caritas Jockey Club Lai King Rehabilitation Centre to its north;

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<sup>2</sup> Block S (Infectious Disease Centre) of PMH (147mPD) was completed in 2007 before the stipulation of BHR (125mPD) for PMH site on the OZP on 20.4.2012

- (b) to its further east and northeast is a residential cluster including Lai Yan Court, Lai Chi Kok Bay Garden, Happy Villa, Wah Lai Estate, Nob Hill and a “Comprehensive Development Area” site at Kau Wa Keng; and
- (c) to its immediate east and northeast is the sloped areas with trees and shrubs.

## **7. Planning Intention**

- 7.1 The planning intention of “G/IC” zone is primarily for the provision of GIC facilities serving the needs of the local residents and/or a wider district, region or the territory. It is also intended to provide land for uses directly related to or in support of the work of the Government, organisations providing social services to meet community needs, and other institutional establishments.
- 7.2 Paragraph 7.9 of the ES to the OZP states that in general, a minor relaxation clause in respect of BHR is incorporated into the Notes in order to provide incentive for developments/ redevelopments with planning and design merits. Each application for minor relaxation of BHR will be considered on its own merits and the relevant criteria for consideration of such relaxation are as follows:
- (a) amalgamating smaller sites for achieving better urban design and local area improvements;
  - (b) accommodating the bonus plot ratio granted under the Buildings Ordinance in relation to surrender/dedication of land/area for use as public passage/street widening;
  - (c) providing better streetscape/good quality street level public urban space;
  - (d) providing separation between buildings to enhance air ventilation and visual permeability; and
  - (e) other factors, such as site constraints, need for tree preservation, innovative building design and planning merits that would bring about improvements to townscape and amenity of the locality, provided that no adverse landscape and visual impacts would be resulted from the innovative building design.

## **8. Comments from Relevant Government Departments**

- 8.1 The following Government departments have been consulted and their views on the planning application, FI and the public comments received are summarised as follows:

### **Health**

- 8.1.1 Comments of the Secretary for Food and Health (SFH):

She in-principle supports the proposed minor relaxation of BHR for the redevelopment of KCH.



## **Traffic**

### 8.1.2 Comments of the Commissioner for Transport (C for T):

- (a) no objection to the application;
- (b) the applicant shall indicate the current arrangement of visitor car parking and provide 10 visitor carpark spaces to suit the operation needs;
- (c) the applicant shall review the taxi queue arrangement to minimise the impact to the local road circulation;
- (d) in accordance with Hong Kong Planning Standards and Guidelines (HKPSG), accessible parking space shall be 5m long x 3.5m wide or provide 1.2m loading spaces between 5m long x 2.5m wide accessible parking space; and
- (e) approval condition on the design and implementation of vehicular access, provision of parking spaces, loading/unloading, taxi queue arrangement should be imposed should the application be approved.

### 8.1.3 Comments of the Chief Highway Engineer/New Territories West, Highways Department (CHE/NTW, HyD):

He has no comment on the application from the highway maintenance point of view.

## **Urban Design, Landscape and Air Ventilation**

### 8.1.4 Comments of the Chief Town Planner/Urban Design and Landscape, Planning Department (CTP/UD&L, PlanD):

#### Urban Design

- (a) the proposed redevelopment involves a cluster of new building ranging from about 100-120mPD which is not considered incompatible with the immediate surroundings where the BH of PMH buildings to its south ranged from 91mPD to 147mPD;

#### Air Ventilation

- (b) an AVA Initial Study using computational fluid dynamics supplemented by qualitative assessment on the surrounding elevated structures has been conducted to support the current application. Two scenarios, i.e. the Base Scheme and Proposed Scheme, have been assessed in the study. The Proposed Scheme has incorporated various mitigation measures including (i) a landscape area in Phase 3; (ii) a 13.2m wide building separation between Block E and Block F; and (iii) a 18.4m wide access road between Development Phases 1 and 2. According to the simulation results, the Proposed Scheme and Baseline Scheme have achieved the same overall ventilation performance under both annual and summer conditions. However, there are some specific affected areas. Along the project site

boundary, the ventilation performance would be slightly deteriorated under the Proposed Scheme under the annual condition. For the surrounding area, the proposal would induce comparatively more significant impact on PMH School of General Nursing & Quarters under the annual condition. The performance at Kau Wa Keng San Tsuen and Princess Margaret Hospital Road would also deteriorate under the Proposed Scheme under both annual and summer conditions;

- (c) in order to alleviate the potential adverse impact on Kau Wa Keng San Tsuen, the consultant has recommended increasing the permeability of the southern façade of the car park podium. She has no further comment on the AVA Report;
- (d) it is noted that the submitted scheme is indicative in nature and the future development may be modified in the detailed design stage. The applicant shall provide appropriate mitigation measures to ensure that the future design would have no adverse impact to the surrounding pedestrian wind environment including but not limited to the followings: (1) the landscape area in Phase 3 to improve the permeability of the northern part of the Site, (2) a building separation with a minimum width of 15m facilitating wind penetration through the Site under north-easterly to Fire Services Department Workshop (Kwai Chung) and south-westerly wind penetration to the landscape area; and (3) a building separation with a minimum width of 18m facilitating wind penetration through the Site under north-easterly to PMH School of General Nursing & Quarters and south-westerly to Wah Fung Garden. Further mitigation measures should also be considered in the detailed design stage, for example more permeable elements especially at the ground level and further widening of the building separations in order to facilitate wind penetration through the Site;

#### Landscape

- (e) no principle objection to the application from the landscape planning perspective;
- (f) the application is on a vegetated hillslope surrounded by developments for government use such as PMH at the south and Caritas Jockey Club Lai King Rehabilitation Centre at the far north. The proposed development is not incompatible with the existing landscape character;
- (g) it is considered that landscape provision would not be significantly reduced by the proposed BHR and the applicant has committed to meet the provision of local open space according to HKPSG requirement. Major adverse landscape impact due to the proposed development is not anticipated; and
- (h) it is expected that the tree preservation and landscape provision related to the redevelopment will be controlled through the existing land administrative and project management mechanism. It is

therefore considered not necessary to impose landscape condition if the application is approved.

### **Environmental**

#### 8.1.5 Comments of the Director of Environmental Protection (DEP):

He has no objection to the planning application from environmental planning angle based on the SPS, EA Study report, SIA report (**Appendices Ia to Ib**) and the FI submitted on 20.11.2017 and 14.12.2017 (**Appendices Ic to Id**).

### **Ecological**

#### 8.1.6 Comments of the Director/Agriculture, Fisheries & Conservation (DFAC):

- (a) no objection to the application; and
- (b) other detailed comments are at **Appendix II**.

### **Drainage and Sewerage**

#### 8.1.7 Comments of the Chief Engineer/Mainland South, Drainage Services Department (CE/MS, DSD) :

He has no comment on the planning application, the DIA and SIA reports.

### **Geotechnical**

#### 8.1.8 Head of Geotechnical Engineering Office, Civil Engineering & Development Department (H(GEO), CEDD):

He has no geotechnical objection to the application.

### **Fire Safety**

#### 8.1.9 Comments of Director of Fire Services (D of FS):

- (a) no objection in principle to the application subject to the provision of fire service installations and water supplies for firefighting to the satisfaction of Fire Services Department (FSD);
- (b) detailed fire services requirements will be formulated upon receipt of formal submission of general building plans; and
- (c) the arrangement of EVA shall comply with Section 6, Part D of the “Code of Practice for Fire Safety in Building 2011” which is administered by the BD.

### **Water Supplies**

#### 8.1.10 Comments of the Chief Engineer/Construction, Water Supplies Department (CE/Construction, WSD):

- (a) no objection to the application;
- (b) upgrading of the existing salt water supply system is required to provide salt water to the proposed site. The tentative earliest completion date for the upgrading of the salt water supply system is at 2023;
- (c) it is noted that the location plan of the Site covers the waterworks reserve area for the 48" diameter primary distribution main. The status of the waterworks reserve area and the 48" diameter water main shall not be affected by the application;
- (d) it is also noted that flushing water and cooling water to the KCH and flushing water to the PMH are currently provided by a seafront pump house under the Hospital Authority. The surplus water is then transferred to Lai Chi Kok Salt Water Service Reservoir for providing flushing water supply to the consumers at Lai King and part of Mei Foo areas. As such, the impacts, if any, arising from the redevelopment on these such facilities (i.e. the pump house and associated water mains) which are outside the Site should be included for the project of KCH redevelopment as a whole; and
- (e) other detailed comments are at **Appendix II**.

### **District Officer's Comments**

8.1.11 Comments of the District Officer (Kwai Tsing), Home Affairs Department (DO(K&T), HAD):

- (a) no comment on the application from the community point of view; and
- (b) he has posted the application on the notice boards at his office, ~~the Shek Lei Community Hall~~, the Lai King Community Hall and the Kwai Fong Community Hall respectively from ~~27.10.2017 to 17.11.2017~~ and 31.10.2017 to 21.11.2017, and has not received any comment on the application.

8.2 The following departments have no comment on the application:

- (a) Director of Health (D of Health);
- (b) District Lands Officer/Tsuen Wan and Kwai Tsing, Lands Department (DLO/TW & KT, LandsD);
- (c) Project Manager (New Territories West), Civil Engineering & Development Department (PM (NTW), CEDD);
- (d) Chief Architect/Central Management Division 2, Architectural Services Department (CA/CMD2, ArchSD); and
- (e) Chief Building Surveyor/New Territories West, Buildings Department (CBS/NTW, BD).

## 9. Public Comments Received During Statutory Publication Period

- 9.1 On 31.10.2017, the application was published for public inspection. During the three weeks of statutory public inspection period, 2 public comments supporting the application were received from the vice chairman and a member of Kwai Tsing District Council (K&TDC) (**Appendix III**). One of them supports the application without specifying the ground while another supports the application mainly on the grounds that the proposed development would improve the existing medical facilities of KCH, and provide sufficient healthcare services for the residents.

## 10. Planning Considerations and Assessments

### Planning Intention

- 10.1 The Site falls within an area zoned “G/IC” on the OZP which is intended for the provision of GIC facilities serving the needs of the local residents and/or a wider district, region or the territory. It is also intended to provide land for uses directly related to or in support of the work of the Government, organisations providing social services to meet community needs, and other institutional establishments. The proposed redevelopment of KCH, which is intended to upgrade the medical facilities to serve the community’s increasing demand for health care services, is considered in line with the planning intention of the “G/IC” zone.

### Minor Relaxation of BHR

- 10.2 The proposed minor relaxation of BHR from 110mPD (the existing BH of KCH) to 120mPD to facilitate the redevelopment of KCH requires planning permission from the Board.
- 10.3 The Site is located within a predominantly low-to-medium-rise “G/IC” cluster including PMH and PMH Nursing Quarters on raised platforms. In the 2012 Kwai Chung OZP Review on BH control, a BHR of 110mPD was stipulated for the GIC cluster of KCH to reflect the predominant existing BH of these medium-rise buildings on the headland top. The proposed development is generally considered compatible with the existing BH profile of the surrounding developments in the cluster ranging from about 85mPD to 119mPD (**Plan A-2**). Besides, the existing BH of Block G and S of PMH is already at a BH of 124mPD and 147mPD respectively. Hence, a relaxed BH of 120mPD is considered visually acceptable and compatible with the surrounding developments.
- 10.4 The proposed redevelopment involving an additional BH from 110mPD to 120mPD (i.e. +9.1%) is not significant and the proposed increase could be considered minor in nature. Besides, the photomontages of VIA illustrating the difference in height between the OZP compliant scheme and the proposed scheme demonstrate that the proposed minor relaxation of BHR would not generate significant visual and landscape impacts (**Drawings A-24 to A-30**). The AVA has proposed various mitigation measures including the landscape area in the northern part of the Site, building separation, provision of wide access road and building design to increase permeability of the carpark podium. On these aspects, CTP/UD&L, PlanD has no adverse comment on the proposal from visual, air ventilation and landscape planning points of view. Relevant advisory clauses regarding the air ventilation measures proposed by the applicant are recommended in **Appendix IV** should the application be approved by the Committee.

- 10.5 The improvement of health services through in-situ redevelopment by phase is considered essential to the operation of KCH where the hospital will continue and focus on the provision of psychiatric services to the community. Due to site constraint with the presence of large amount of existing slopes bordering the Site, the remaining buildable area within the Site is very limited and adjustment of building footprints is restricted. Besides, land has to be set aside for the provision of the new road network within the Site.
- 10.6 With the relaxed BH, there would be planning merit such that the proposed redevelopment can achieve a better building/layout design to enhance internal circulation, improve the ward and patients' environment with gardens to be enjoyed by the patients/visitors, provide more supporting areas and improve operation efficiency in order to meet the increasing demand for higher quality medical services (**Drawings A-2 to A-23**). Besides, there is an increase in number of beds from 920 to about 1,000 after the redevelopment based on the endorsed 10-years Hospital Redevelopment Plan. Taking the above into account, the proposed increase in BH can be considered to have satisfied the relevant criteria in the ES of the OZP (see paragraph 7.2(e) above). SFH supports in-principle the minor relaxation of BHR to facilitate the redevelopment of KCH.

#### Traffic and Technical Aspects

- 10.7 On the traffic aspect, the TIA submitted by the applicant demonstrates that the proposed development is acceptable from traffic point of view. Based on the TIA and the traffic measures proposed, both C for T and CHE/NTW, HyD have no in-principle objection/comment on the application from traffic engineering and highway maintenance perspectives. Regarding C for T's comments in paragraph 8.1.2 above, approval condition on the design and implementation of vehicular access, provision of parking spaces, loading/unloading, taxi queue arrangement is suggested.
- 10.8 On the environmental and technical aspects, the applicant has carried out environmental assessments including EAS, DIA and SIA to demonstrate that the proposed development is acceptable on environmental grounds. Government departments including WSD, DSD and EPD have no adverse comment on/no objection to the application from environmental and infrastructural aspects.
- 10.9 The public comments received are all supporting the application.

### **11. Planning Department's Views**

- 11.1 Based on the assessment made in paragraph 10 and having taken into account the public comments mentioned in paragraph 9, the Planning Department has no objection to the application.
- 11.2 Should the Committee decide to approve the application, it is suggested that the permission shall be valid until 2.3.2022, and after the said date, the permission shall cease to have effect unless before the said date, the development permitted is commenced or the permission is renewed. The following conditions of approval and advisory clauses are suggested for Members' reference:

Approval Conditions

- (a) the provision of fire service installations and water supplies for fire-fighting to the satisfaction of Director of Fire Services or the Town Planning Board; and
- (b) the design and implementation of vehicular access, parking provision, loading/unloading including taxi queue arrangement to the satisfaction of Commissioner for Transport or the Town Planning Board.

Advisory Clauses

The recommended advisory clauses are attached at **Appendix IV**.

11.3 Alternatively, should the Committee decide to reject the application, the following reason for rejection is suggested for Members' reference:

- (a) no strong planning and design merits have been demonstrated to justify the proposed minor relaxation of building height restriction for the site.

**12. Decision Sought**

- 12.1 The Committee is invited to consider the application and decide whether to grant or refuse to grant permission.
- 12.2 Should the Committee decide to approve the application, Members are invited to consider the approval condition(s) and advisory clause(s), if any, to be attached to the permission, and the date when the validity of the permission should expire.
- 12.3 Alternatively, should the Committee decide to reject the application, Members are invited to advise what reason(s) for rejection should be given to the applicant.

**13. Attachments**

<b>Appendix I</b>	Application form received on 24.10.2017
<b>Appendix Ia</b>	Applicant's letter received on 24.10.2017 together with the SPS
<b>Appendix Ib</b>	FI received on 20.11.2017 providing replacement pages of EA and SIA
<b>Appendix Ic</b>	Letter dated 8.12.2017 requesting for deferment
<b>Appendix Id</b>	FI received on 14.12.2017 providing response to departmental comments with replacement pages of SIA and GPRR
<b>Appendix Ie</b>	FI received on 20.12.2017 providing response to departmental comments with technical clarification to AVA
<b>Appendix If</b>	FI received on 12.1.2018 providing supplementary floor plans
<b>Appendix Ig</b>	FI received on 23.1.2018 providing a supplementary EE of AVA
<b>Appendix Ih</b>	FI received on 9.2.2018 providing replacement pages of GPRR, AVA and architectural drawings
<b>Appendix Ii</b>	FI received on 20.2.2018 providing replacement pages of SPS, section plans and layout plans
<b>Appendix Ij</b>	FI received on 23.2.2018 providing clarification statement, replacement pages of section plans and photomontage

<b>Appendix II</b>	Detailed comments of concerned departments
<b>Appendix III</b>	Public comments received
<b>Appendix IV</b>	Recommended advisory clauses
<b>Drawing A-1</b>	Master Layout Plan
<b>Drawings A-2 to A-5</b>	Section plans
<b>Drawings A-6 to A-7</b>	Layout plans
<b>Drawings A-8 to A-23</b>	Floor plans
<b>Drawings A-24 to A-30</b>	Photomontages
<b>Plan A-1</b>	Location plan
<b>Plan A-2</b>	Site plan
<b>Plan A-3</b>	Aerial photo
<b>Plans A-4 to A-5</b>	Site photos
<b>Plan A-6</b>	The existing and proposed building layout

**PLANNING DEPARTMENT  
MARCH 2018**