

立法會衛生事務委員會

就於 2013 年 4 月 15 日會議上  
討論私營醫院的發展  
所提交的補充資料

本文件旨在就於 2013 年 4 月 15 日衛生事務委員會會議上提出有關私營醫院的發展，提交補充資料。

*就在黃竹坑預留土地上興建的新私營醫院與GHK Hospital Limited簽署的服務契約，有關在該契約下計算損害賠償的資料*

2. 成功競投黃竹坑預留土地興建新私營醫院的競投者，根據服務契約需要繳付款項彌償相關損失的計算方法，載於招標文件中服務契約的附表 5。整份招標文件(包括該附表)已載於 2012 年 5 月衛生事務委員會會議的文件之中，現把該附表 5(原文只有英文)載於附件，供委員參閱。

食物及衛生局  
二零一三年七月

## Schedule 5 – Liquidated Damages

Ref	Performance Obligation	Default	Amount
1	Limit the number of Obstetric Beds to the percentage designated in the Schedule 2 Annexes of the total number of Hospital Beds to be provided in the Hospital by the Purchaser as specified in the Land Grant for the relevant Service Year, in accordance with paragraph 2.1 of Schedule 2.	Making available Obstetric Beds in excess of the percentage cap as specified in Schedule 2 Annexes	For each Obstetric Bed made available exceeding the cap, the additional revenue generated through the provision of an Obstetric Bed when compared with the average revenue generated by other Hospital Beds.
2	Provide the number of In-Patient Bed Days equivalent to the Shortfall Add-on as In-Patient Bed Days through Standard Beds as a Package Service to Eligible Person in the Service Year immediately following the Service Year in which the original shortfall occurred (as further detailed in paragraph 4 of Schedule 2)	Failure to provide the number of In-Patient Bed Days equivalent to the Shortfall Add-on as In-Patient Bed Days through Standard Beds as a Package Service to Eligible Person in the Service Year immediately following the Service Year in which the original shortfall occurred	For each In-patient Bed Day in deficit of the Shortfall Add-on, the difference between the average revenue generated through the provision of non-packaged in-patient service per patient day and that of packaged in-patient service per patient day.
3	Provide more than fifty (50)% (or higher percentage if designated in the Schedule 2 Annexes) of In-Patient Bed Days taken up for service in a Service Year to Eligible Persons in accordance with paragraph 5 of Schedule 2.	Failure to provide more than 50% (or higher percentage if designated in the Schedule 2 Annexes) of In-Patient Bed Days taken up for Service in a Service Year to Eligible Persons.	For each In-Patient Bed Day in deficit of 50% or the designated percentage, the difference between average additional revenue generated for in-patient service for non-Eligible Persons per bed day and the prevailing unit cost of inpatient services per bed day of public hospital managed by Hospital Authority.