Introduction
Managing chronic ventilator-dependent (CVD) patients poses a daunting challenge to healthcare professionals; as these patients often have substantial morbidity and mortality.

Objectives
WTSH is designated to serve CVD patients from medical wards of the Kowloon clusters since 2015, as a COC (Medicine) annual plan programme. Centralizing care of these patients in specialized, respiratory centre serves the purposes of i) alleviating burden of acute hospitals and ii) improving health outcomes.

Methodology
Adult patients requiring continuous, invasive mechanical ventilation for 60 days or more were eligible for admission to our centre. CVD patients assessed to have weaning/rehabilitative potentials are triaged for multi-disciplinary rehabilitation for further weaning attempt and/or preparing for home mechanical ventilation.

Result
From October 12, 2015 to October 11, 2016, out of 22 referrals of CVD patients (15M, 7F) from medical wards of the Kowloon clusters; 15 patients (12M, 3F) were transferred to our centre, amongst whom the number from various hospitals was CMC 1, KH 2, KWH 3, NDH 1, PMH 3, QEH 1, TKOH 2, UCH 1 and YCH 1. Their mean age was 62.7 (n=15, 29-88, SD14.6). The disease categories attributed for ventilation dependency in the transferred patients were (i) Neuromuscular disorders (n=8) (ii) CNS disorders (n=3) (iii) COPD (n=1) (iv) Post cardiac arrest (n=2) and (v) Interstitial lung disease (n=1). Their mean and median number of ventilation days before transfer was 344 and 155
respectively (n=15, 57-2,073, SD 496.6).
Most patients with neuromuscular disorders have advanced progressive life-limiting conditions & 6 (including 5 MND) had succumbed.
2 had been successfully weaned off ventilator, including a 61-year post-stroke patient and a 29-year anti-NMDA receptor encephalitis patient who had been ventilator-dependent for 886 & 2,073 days respectively before transfer.
1 63-year post-stroke patient who had been ventilator-dependent for 155 days before transfer is now sustaining 18 consecutive hours of SBT daily, with a view to complete liberation.
2 including a 68-year MND patient with family commitment for caregiving and a 46-year Pompe disease patient are now on rehabilitation preparing for mechanical ventilation at home/community.