

Estates Returns Information Collection (ERIC) 2015/2016

Data Fields and Definitions

SCCI Approved: SCCI2083

This return is mandatory for all NHS trusts

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Executive Summary

This return forms the central collection of Estates and Facilities data from all NHS organisations in England providing NHS funded secondary care during the fiscal year ending 31st March. ERIC data provides the Government with essential information relating to the safety, quality, running costs and activity related to the NHS estates and also supports work to improve efficiency. It is therefore critical that the data is provided is of the highest quality in terms of its accuracy as well as being consistent with other trusts.

Data should be entered via the efm-information web site, <http://efm.hscic.gov.uk>, accessed through the appropriate username and password. Each trust has a designated ERIC point of contact who can set up further sub-users on a read only or read write basis.

Purpose of the collection

To minimise the burden on the NHS, ERIC data is collected on the basis of “collect once, use many times” so that all the parties interested in the NHS estate have access to the data they need, without the need for multiple collections. The main users of the ERIC data, and those that are consulted about what data is collected, are:

- Department of Health (DH) and Arm’s Length Bodies (ALBs) - DH is accountable to the public and Parliament for the NHS, including its funding, and therefore its Estates & Facilities. It therefore requires data to ensure this, including the ability to determine the level of efficient use of such funding. As Estates & Facilities is the third largest cost (£8.3 billion) for the NHS and its single largest asset (£40 billion for 2014-15), data collected on Estates & Facilities has a high profile. In addition to funding, data is also required by DH and its ALBs to make decisions on areas of policy e.g.investment planning and income generation.
- NHS Regulators - The NHS Constitution now includes the following: “You have the right to be cared for in a clean, safe, secure and suitable environment.” The NHS Regulators therefore will include the environment, the estate and its facilities services, in their review process. The ERIC data is a key element in of that review and making decisions on inspections.
- Other Government Departments (OGDs) - While DH has primary responsibility for the NHS, some OGDs have indirect interest. For instance, budgets for NHS expenditure are approved by HM Treasury (HMT) and evidence is required to support business cases for that expenditure. ERIC provides such evidence in relation to Estates & Facilities.
- Trusts use the data collected through ERIC to benchmark themselves against other trusts to determine their relative levels of efficiency, safety and quality. In addition, ERIC data is used for local investment planning, contract negotiation and service management.

Data Quality

Whilst trusts have different estate and facilities needs as well as different approaches to management locally, ERIC aims to collect nationally consistent and accurate data that can be relied upon to support analysis. It is therefore essential that trusts ensure that all data provided by them is complete, accurate and up-to-date. Errors in data provision can not always be subsequently rectified and may have an impact on trusts not only in terms of reputation but also funding decisions.

Confidentiality, Copyright and Freedom of Information

The EFM system and related modules, outputs and reports are subject to Copyright. Data is held confidentially until publication, subject to the published terms and conditions. The ERIC return is an Official Statistic to which you have privileged access in advance of release. Such access is carefully controlled and is provided to you for management, quality assurance and benchmarking purposes only. Release into the public domain or any public comment on the data prior to official publication is strictly prohibited in accordance with the UK Statistics Authorities code of practice <http://www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html>

Reporting

All figures relating to costs and usage are for the preceding financial year. Any data relating to the condition of the estate should reflect that condition as at 31st March. Figures should be exclusive of VAT, unless the VAT cannot be reclaimed.

Data provided for Trust level questions should include all sites used by the trust including PFI sites. Data for PFI sites should be included in sections T01 to S14 and also in section S15. This means PFI data will be reported twice but will allow PFI and Non-PFI data to be separately identified. Where trusts have a PFI contract but out-source provision of any services these should be treated as Non-PFI.

This data return is split into two levels:

- Trust level, prefixed with a (T), collecting data for the whole organisation.
- Site level, prefixed with an (S), collecting data at either as an individual site or consolidated - see table below

	INPATIENT SERVICES/ NUMBERS		
SITE SIZE (GIA)	None	1 - 9 inpatient beds	10 or more inpatient beds
Up to 199m ²	Not reported	Not Reported	Individually reported at site level
200m ² - 499m ²	Aggregate Site	Aggregate Site	Individually reported at site level
500m ² or more	Aggregate Site	Individually reported at site level	Individually reported at site level

A site is defined as any building or associated group of buildings, including administrative buildings within a specified area for which a trust incurs a cost to occupy. Where sites/properties are shared with other trusts the Apportionment Rules should be applied.

The general principle is provider trusts should provide data for all properties that meet the site reporting criteria detailed in this section. The data will reside with the provider trust or in the case of leased or similar properties with other third parties and often a mixture of the two. For clarity we include below details of the main ownership/lease arrangements and how these are dealt with in the ERIC return. It is important to read and understand this section so you do not waste time completing data you do not have to.

Freehold and leased properties with full repair and maintenance: should provide all data. The assumption is data will/should be available within the provider organisation (or their suppliers/subcontractors) and should be accurately provided.

Where responsibility for a property/site for which an ERIC return is required, individual or consolidated, changes part way through the reporting period, each trust should report for the period of its occupancy wherever possible. In the event of accurate figures not being readily available, an informed best estimate will be acceptable pending the introduction, by the trust, of mechanisms that will ensure the provision of accurate information in future. Where there is an unresolved dispute over a charge between a Trust and supplier/landlord the amount to be entered is that claimed by the supplier/landlord since that is the potential maximum liability.

Leased properties which are either fully or part serviced by the landlord (including NHS Property Services Ltd): Where a trust occupies premises through a lease or similar arrangement, then the trust should make every effort to obtain all relevant details from the landlord in order to complete the ERIC return. Where this is not possible or only possible for some data fields Trusts should report in accordance with the data definitions. If for reasons of 'commercial - in confidence' or work undertaken as an 'all inclusive cost', then the organisation should provide a reasonable estimate of the figures either through carrying out surveys and measurement of their own or through an informed assessment, especially in consideration of their Duty of Care responsibilities. This will enable the provision of performance indicator outcomes that accurately reflect the position of the facilities in which the organisation is delivering its healthcare services.

Sites operated under a PFI contract: Trusts delivering healthcare services from property under a PFI Agreement are required to submit a return for for each contract, see Section S15. Data for PFI sites should be included in sections T01 to S14 and also in section S15. This means PFI data will be reported twice but will allow PFI and Non-PFI data to be separately identified. Where trusts have a PFI contract but out-source provision of any services these should be treated as Non-PFI. Where the PFI part of the site is leased out to another NHS organisation, the cost of the lease should be treated as non-PFI in the ERIC return of that trust. Where any service covered by Section S15 is provided to the PFI provider through a sub-contract (e.g. food; cleaning; linen) from an NHS organisation or another supplier, this is still a cost of the PFI contract and should be included in the relevant section.

NHS Property Services Ltd. (NHS PS): For the 2015/16 reporting period, NHS PS have committed to providing trusts with the data they need to complete this return - see Appendix A for details. All trusts who lease properties/areas and/or receive services from NHS PS should therefore contact them to obtain all available relevant data and include this in their ERIC return. If you encounter problems regarding the availability of this data please contact NHS PS directly at information@property.nhs.uk.

Staff Residential units: All costs associated with staff residential units in the ownership of the NHS and used by trust personnel should be included within the relevant sections of the return, inclusive of floor area, energy, maintenance costs, staffing, estates and hotel services etc. Residential units provided by non-NHS organisations (e.g. Housing Associations, private sector landlords etc.) should be excluded. Apply apportionment rules where relevant.

Premises awaiting disposal: Property that is vacated and awaiting disposal at the end of the reporting year should not be included within the return unless it has been operational for more than 6 months of the reporting year in which case the relevant figures should be included. Figures relating to property that is temporarily unoccupied by the organisation and is likely to be brought back into service in the future, should be included.

Apportionment Rules

Where a site is shared between trusts, figures within the ERIC return should be apportioned to reflect the proportion of the estate occupied by each trust. Where a trust provides estates and facilities services to another trust then the provider trust must forward the required information to the receiving trust in order for them to incorporate the data into their ERIC return.

In order to avoid duplication figures relating to services provided to other trusts should be excluded from the provider trust. It is important to note that performance indicators and benchmarking comparisons derived from this return are required to be based solely upon information appertaining to all of the healthcare activities for which the trust itself is responsible. In circumstances where apportionment is not clear then trusts should take a pragmatic and common sense approach in agreeing the extent of shared figures to which each party can enter into their ERIC return. For examples of apportionment please see Appendix B - Apportionment worksheet.

Appendices

Supplementary Information: This provides additional background information regarding sections within the return where relevant a copy of the appendix is available within that section of the module under the Appendix A-NHS PS: Provides details of questions that NHS PS and CHP are able to provide to its tenant to assist with the completion of their return.

Appendix B-Apportionment: Provides details of apportionment examples.

Appendix C-Energy: Provides worked examples of calculations and conversion factors.

Appendix D-PFI: Toolkit to calculate costs for S15 PFI section.

Appendix E-Food: Toolkit providing detailed elements to calculate the costs for S12 Inpatient food services section

Appendix F-Areas: Provides detailed list of areas to be included within S03_07 clinical space and S03_08 non-clinical space.

Appendix G-Waste Codes

Limitations

These definitions are provided for use in the collection of ERIC data only. They should not be used for other purposes e.g. the specification of work for tenders or contracts. Appropriate definitions should be used in these cases in line with professional guidance.

T01. Trust Profile

Ref.	Field	Unit	Definition
01	Number of sites	No.	The combined total of this section should represent the total number of sites which the trust occupies for the purposes of delivering its healthcare services, inclusive of premises owned by the trust or as defined within the terms of a lease, Service Level Agreement or tenancy agreement. Where sites are shared with other trusts the site type allocated should be that relevant to the function of the facilities being reported on by the occupying/reporting trust, which may differ from the designation of the remainder of the site e.g. a hospital may be classed as General Acute by one provider (the owner) and Mental Health by another provider.
01A	General Acute Hospital	No.	Sites that provides a range of inpatient medical care and other related services for surgery, acute medical conditions or injuries (usually for a short term illness or condition). Treatment Centres providing inpatient facilities are classed as General Acute Hospitals.
01B	Specialist Hospital (Acute only)	No.	Sites that undertake a single specialist function, inclusive of Oncology, Orthopaedics, Dental Hospital, Maternity Hospital, Children's Hospital, Cardio/Thoracic. This category excludes specialist hospitals in the Mental Health or Learning Disabilities sector.
01C	Mixed Service Hospital	No.	Sites where two or more functions are provided BY THE SAME PROVIDER (see note below). Such functions would include any combination of single speciality, acute services, community services, mental health services and learning disabilities services.
01D	Mental Health (including Specialist services)	No.	Sites exclusively providing Mental Health services including specialist mental health services e.g. secure units. See 01F where Mental Health services are combined with Learning Disabilities services at the same site and with the same provider.
01E	Learning Disabilities	No.	Sites exclusively providing learning disabilities services. See T01_01F where Learning Disabilities servicea are combined with Mental Health on the same site and with the same provider.
01F	Mental Health and Learning Disabilities	No.	Both mental health and learning disabilities provided from the same site by the same provider. This differs from T01_01C above in that no Acute/Specialist or Community services will be provided.
01G	Community Hospital (with inpatient beds)	No.	Sites that provide an alternative to acute, general hospital care, closer to people's homes and responding to local need. There may be a Minor Injuries Unit but not an Emergency Department. May also include inpatient care for older people, rehabilitation or maternity services, out-patient clinics and day surgery/care as well as diagnostics. Where there are no inpatient facilities the site should be classed as Non-inpatient (see T01_01I below).
01H	Other inpatient	No.	Sites which are providing inpatient services but which do not meet any of the other definitions above. This would include but is not limited to Hospices, Intermediate Care Units or similar, nursing homes, residential care homes and group homes. Mental Health or Learning Disabilities services SHOULD NOT be included in this category.
01I	Non inpatient	No.	Including but not limited to Health Centres, Clinics, Ambulatory Diagnostic Centres, Mobile units and Treatment Centres providing day case services only. This definition also includes Community Hospitals where there are no inpatient facilities.
01J	Support facilities	No.	Sites that are administrative or other support service sites, ambulance stations including control centres, standby points and radio masts, education and training, and any other non-hospital site where patients are not treated or accommodated. Sites solely used for the provision of staff residential accommodation should be included.
01K	Unreported sites	No.	The total number of sites which fall to be disregarded in accordance with the Site Reporting - GIA less than 200m ² .

T02. Strategies and Policies

Ref.	Field	Unit	Definition
01	Estates Development Strategy	Yes/No	Does the trust have a Board approved Estates Development Strategy which is strategically aligned to the clinical strategy to improve the quality, efficiency and effectiveness of the estates and facilities services. If answer is "yes", please send a PDF copy to estatestrategies@dh.gsi.gov.uk .
02	Healthy transport plan	Yes/No	Does the trust have a Board approved Transport Management Plan developed in accordance with HTM 07-03 or a similar assessment framework.
03	Adaptation Plan	Yes/No	Does the trust have a board approved plan which addresses the potential need to adapt the delivery of the organisation's activities and infrastructure as a result of climate change and adverse weather events. To answer Yes the plan must have been: <ul style="list-style-type: none"> ▪ Approved by the board or governing body within the time period covered by the plan e.g. plan for 5 years then within those five years; and ▪ Updated showing progress within the last 12 month and resubmitted to the board or governing body. See Completion Note below
<p>Completion Note: The plan will take into account an acknowledgement by the organisation of the risks presented by climate change to the continued functioning and performance of their healthcare service provision and will be in line with the NHS Operating Framework, NHS Contracts and NHS SDU Adaptation Guidance as part of Sustainable Development Management Plans (SDMPs) http://www.sduhealth.org.uk/delivery/plan.aspx, Plans should be based on the UK Climate Projections 2009 http://ukclimateprojections.metoffice.gov.uk/ and draw on relevant national and local evidence. Advice and support is available from the SDU, email england.sdu@nhs.net and the Environment Agency's Climate Ready Support Service https://www.gov.uk/government/policies/adapting-to-climate-change - http://www.sduhealth.org.uk/policy-strategy/legal-policy-framework/adaptation.aspx</p>			
04	Sustainable Development Management Plan / Carbon Reduction Management Plan	Yes/No	Does the Trust have a board approved Sustainable Development Management Plan (SDMP) or Carbon Reduction Management Plan (CRMP). To answer Yes the plan must have been: <ul style="list-style-type: none"> ▪ Approved by the board or governing body within the time period covered by the plan e.g. plan for 5 years then within those five years; and ▪ Updated showing progress within the last 12 month and resubmitted to the board or governing body. Guidance available at: http://www.sduhealth.org.uk/delivery/plan.aspx
05	Carbon reduction target	Option 1-4	Is the Trust's board-approved SDMP or CRMP on track for an absolute carbon reduction target of 34% by 2020 on a 1990 baseline or equivalent. The 34% target is based on the Climate Change Act. Where a 1990 baseline is not available a 28% reduction from a 2013 baseline can be used as an equivalent. For further information see http://www.sduhealth.org.uk/policy-strategy/engagement-resources.aspx <ol style="list-style-type: none"> 1. On track to meet target 2. Target included but not on track to be met 3. No target included in plan 4. No SDMP or CRMP
06	NHS Premises and Facilities Assurance - Assessment/Approval	Option 1-5	The NHS Premises and Facilities Assessment has been: <ol style="list-style-type: none"> 1. Assessed and approved by the trust board and Peer Review undertaken 2. Assessed and approved by the trust board 3. Assessed but not approved by the trust board 4. Assessment commenced but not complete 5. Not yet assessed (Note: this option will auto select option 5 in T02_07)
07	NHS Premises and Facilities Assurance - Action Plan	Option 1-5	Has the Trust produced an action plan to address areas of non-compliance identified within their Premises and Facilities assessment ? To answer select from the following options: <ol style="list-style-type: none"> 1. Action plan approved by the trust board and completed 2. Action plan approved by the trust board and being implemented 3. Action plan produced but not approved by the trust board 4. No action plan produced 5. No assessment/action plan (Note: this option will auto select if option 5 in T02_06 selected)

T03. Contracted Out Services

Ref.	Field	Unit	Definition
01	Value of contracted out services	£	The value of contracted out services to provide hard FM (estates) and soft FM (hotel services). Inclusive of equipment maintenance, EBME work, PPM work, repairs, management and manpower resources that have been contracted out to non-NHS organisations e.g. PFI providers and NHS Property Services. Services provided by another trust under SLA using NHS staff should be excluded from the value of contracted-out services. See Completion Note below.
02	Percentage of hard FM (estates) and soft FM (hotel services) contracted out	%	The percentage of hard FM (estates) and soft FM (hotel services) that are contracted out. Inclusive of equipment maintenance, EBME work, PPM work, repairs, management and manpower resources that have been contracted out to non-NHS organisations including PFI and NHS Property Services. Services provided by another trust under SLA using NHS staff should be excluded from the value of contracted-out services but relevant costs included in the total cost for the services. See Completion Note below.

Completion Note: The common elements that relate to Hard FM (Estates) and Soft FM (Hotel) services are listed below. This is not an exhaustive list and trusts should add elements as appropriate. If in

Hard FM (Estates) services

Estates and Property Management relating to implementing and managing the trust's capital programme, excluding capitalised costs and associated staff

Backlog maintenance monitoring, implementing and managing associated investment – both in terms of in-house and outsourced monitoring where applicable;

Fire Safety and Health & Safety compliance relating to the built environment - only include revenue costs, capital compliance expenditure should be excluded;

Grounds and Gardens maintenance - Include indoor plants where provided;

Electro Biomedical Equipment maintenance – Exclude cost of purchasing equipment;

Waste Disposal Services - Including costs reported in S09 as well as any others excluded by the definition;

Car Parking Services - Including all costs of providing car parking, including any payments made to companies providing parking services;

Energy Services - Including costs reported in S07 as well as any others excluded by the definition;

Water & Sewage Services - Including costs reported in S08 as well as any others excluded by the definition;

Helpdesk Service - providing staff, patients or visitors with information and support related to estates & facility services e.g. urgent cleaning or out of hours food services. This may be known by different names e.g. "service desk";

Building and Engineering repairs and maintenance relating to the built environment - Including those costs separately recorded at S01_04 as well as any others excluded by the definition;

Equipment maintenance relating to the built environment - Non-estates & facilities maintenance should be excluded;

External window cleaning - whether provided in-house or as a contracted service.

Soft FM (Hotel) services

Information Management & Technology fixed wiring systems - Include the costs relating to the provision and maintenance of and repairs to the system. The costs of providing and running these services should be excluded;

Non-emergency patient transport services - Including those specified in T04_07;

Security services - Include both in-house and out-sourced provision.

Food services - This will be S12_01 plus any additional food services costs e.g. outpatient food services. Ward hostess services should be included here;

Telecommunications– Including pager, cell phone and other related services;

Laundry and linen services - Include costs reported in S13 as well as any others excluded by the definition.

Reception services - Only include those reception services for Estates & facilities. Where reception services are provided for and by individual clinical services, e.g. orthopaedics, they should be excluded;

Portering services - Include costs reported in S14 as well as any others excluded by the definition.

Cleaning (domestic) services - including Internal window cleaning

Sterile supply services - Include the costs of sterilization and other actions on medical devices, equipment and consumables, but not the costs of purchasing sterile supplies themselves;

Courier & postal services - Include all forms of external courier or related services e.g. Post Office;

Pest control services - Including both ongoing and responsive services;

Stores services - This should include the management and provision of Estates & facilities stores only. Other stores-type services e.g. clinical and drugs, should be excluded;

Art in hospitals - This should only include art used for decoration purposes and managed by the estates & facilities function. The costs of art therapy for patients should be excluded;

Residential accommodation - Include accommodation provided for doctors and medical students;

Day nursery & crèche services - provided to trust staff.

T04. Finance

Ref.	Field	Unit	Definition
01	Capital investment for new build	£	Annual amount of all capital (not revenue) invested in new build facilities. This should include all capital invested in buildings, engineering plant and external works derived from all sources, inclusive of block capital allocations, External Financial Limit (EFL) allocations, donations and land purchases. Where a capital investment scheme includes elements of new build, improving existing buildings and equipment the costs should be apportioned between capital investment for new build, capital investment for improving existing buildings and capital investment for equipment. Private sector investment, e.g. PFI and LIFT, should be reported in T04_04. The sum of T04_01, T04_02, T04_03 and T04_04 should be the total capital investment for the reporting year.
02	Capital investment for improving existing buildings	£	Annual amount of all capital (not revenue) invested for improving existing buildings. This should include all capital invested in the maintenance of existing buildings, engineering plant and external works including upgrading, redevelopment and refurbishment, inclusive of block capital allocations, External Financial Limit (EFL) allocations, donations and land purchases. Where a capital investment scheme includes elements of new build, improving existing buildings and equipment the costs should be apportioned between capital investment for new build, capital investment for improving existing buildings and capital investment for equipment. Private sector investment, e.g. PFI and LIFT, should be reported in T04_04. The sum of T04_01, T04_02, T04_03 and T04_04 should be the total capital investment for the reporting year.
03	Capital investment for equipment	£	Annual amount of all capital (not revenue) invested on equipment related to estates and facilities. This should include all capital invested on equipment related to estates and facilities, inclusive of block capital allocations, External Financial Limit (EFL) allocations, donations and land purchases. Exclude any equipment costs already included in T04_01 and T04_02, e.g. engineering plant. This should include Groups 1,2,3 as set out in Appendix 5 of the Management of Construction Projects section within the Capital Investment Manual. Please refer to the Equipment Groups in the Completion Note below. Capital equipment related to areas such as food production, laundry and cleaning should be included but not ICT unless it is specifically related to estates and facilities. Where a capital investment scheme includes elements of new build, improving existing buildings and equipment the costs should be apportioned between capital investment for new build, capital investment for improving existing buildings and capital investment for equipment. Private sector investment, e.g. PFI and LIFT, should be reported in T04_04. The sum of T04_01, T04_02, T04_03 and T04_04 should be the total capital investment for the reporting year. See Completion Note below.
<p>Completion Note: Full definitions for engineering plant & equipment groups can be found in Appendix 5 of the Management of Construction Projects section within the Capital Investment manual as they relate to estates and facilities which can be downloaded from http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4119896 A brief outline of the groups is below. Group 1: Items which are supplied and fixed by the contractor under the terms of a building/engineering contract. Group 2: Items which are supplied by the Trust and installed by the contractor under the terms of a building/engineering contract. Group 3: Items which are purchased and delivered/installed directly by the Trust.</p>			
04	Private Sector investment	£	Private sector capital investment (not revenue) e.g. LIFT and PFI. Include all investment for new build, improving existing buildings and equipment. The sum of T04_01, T04_02, T04_03 and T04_04 should be the total capital investment for the reporting year.
05	Investment to reduce backlog maintenance	£	Annual amount invested to reduce backlog maintenance costs, inclusive of physical condition, fire safety and health & safety. Where backlog maintenance has reduced as part of capital investment (T04_01, T04_02, T04_03 and T04_04) the figure reported is the amount backlog has reduced as a result of the capital investment. Where backlog maintenance has reduced through vacating or demolishing buildings, the figure reported will be that associated with the vacation/demolition works.
06	Revenue cost to meet NHS Premises and Facilities Assurance action plan	£	Estimated revenue cost to the Trust for the next financial year to remedy non-compliance actions identified in T02_07. e.g. Authorising Engineer needs funding. In this context, non-compliance relates to actions/activities required to address any inadequacies or make any moderate or minor improvements identified in Action Plans developed as part of the NHS PAM or equivalent assurance model, and so will also include additional costs such as professional fees and additional staff employed for this specific purpose. Backlog maintenance and related capital expenditure that result from non-compliance actions should not be included here.
07	Non-emergency patient transport costs	£	Annual cost to the trust of all, non emergency, patient transport services, including ambulance, taxis and charitable/voluntary services.
08	Income from services provided to others - catering	£	Total annual net income after the deduction of taxes. Service Level Agreements with other NHS organisations should be included, but free services should be excluded. Exclude income earned from leasing out areas for retail purposes as defined in S02_01.
09	Income from services provided to others - laundry and linen	£	Total annual net income after the deduction of taxes. Service Level Agreements with other NHS organisations should be included, but free services should be excluded. Exclude income earned from leasing out areas for retail purposes as defined in S02_01.
10	Income from services provided to others - other	£	Total annual net income after deduction of taxes relating to services other than catering and laundry/linen. Other services include but is not limited to maintenance services, energy, cleaning, portering, waste, advertising/sponsorship, bed head services, wifi, conference services, and any other services should be included as appropriate. Exclude income earned from leasing out areas for retail purposes as defined in S02_01. Service Level Agreements with other trusts should be included where applicable and result in actual payments being made.

T05. Safety

Ref.	Field	Unit	Definition
01	RIDDOR incidents	No.	The number of serious safety incidents reported during this financial year including those defined as RIDDOR incidents reported by the Organisation (in 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013. A Guide to the reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013 can be downloaded via the HSE's website at www.hse.gov.uk/pubns/indg453.htm In addition to RIDDOR incidents, other serious Estates & Facilities incidents should be included e.g. fires. In this context, serious incidents includes deaths and physical injuries.
02	Estates and facilities related incidents	No.	The number of incidents reported through the reported through the National Reporting & Learning System (NRLS) under "infrastructure (including staffing, facilities, environment)" which are directly related to estates and facilities services. Non-E&F incidents e.g. staffing should be excluded.
03	Clinical service incidents caused by Estates and infrastructure failure	No.	Number of incidents caused by estates and infrastructure failure which caused clinical services to be delayed, cancelled or otherwise interfered with owing to problems or failures related to the estates and infrastructure failure. Exclude failures relating to non-estates causes e.g. nursing availability, but include where external incidents which estates and infrastructures should have mitigated e.g. utility power failures where the Trusts backup power system failed to offset. An incident is considered to be a delay of at least 30 minutes to clinical services affecting at least 5 patients or equivalent. Both inpatient and outpatient service incidents should be included. Such incidents will include, but are not limited to: <ul style="list-style-type: none"> • Power and/or heating failures including overheating • Fires and false alarms (where caused by equipment faults or malfunction, deliberate/malicious causes should be excluded) • Water and/or sewage supply • Food production and/or delivery • Pest control

T06. Fire Safety

Ref.	Field	Unit	Definition
01	Fires recorded	No.	Total number of fires recorded as required by HTM 05-01: Managing healthcare fire safety. https://www.gov.uk/government/publications/managing-healthcare-fire-safety
02	False alarms	No.	Total number of false fire alarms recorded for the reporting period not normally reported under FIRECODE.
03	Number of deaths resulting from fire(s)	No.	Total number of deaths of patients, visitors and staff resulting from fire(s).
04	Number of people injured resulting from	No.	Total number of patients, visitors and staff injured resulting from fire(s).
05	Number of patients sustaining injuries during	No.	Total number of patients injured during evacuations, caused by fires or false alarms.

S01. Facilities Management (FM) Services

Ref.	Field	Unit	Definition
01	Hard FM (Estates) costs	£	Total annual revenue cost of the Hard FM (Estates) services. This also includes costs separately identified in S01_04. The total of S01_01 + S01_02 + S01_03 = the total estates and facilities running costs for the trust. See Completion Note below.
02	Soft FM (Hotel Services) costs	£	Total annual revenue cost of the Soft FM (Hotel Services) services. Include all materials and equipment necessary to provide the Soft FM services together with costs associated with relevant Directors time, management, supervisors, trade staff and administrative support employed by the trust and through Contract or Service Level Agreement with another organisation. The total of S01_01 + S01_02 + S01_03 = the total estates and facilities running costs for the trust. See Completion Note below.
03	Estates and Facilities finance costs	£	Total annual revenue cost of financing estates and facilities. Include: Cost of leases - The costs of leases relating to Estates & Facilities paid during the reporting year. Include any payments made under a leased and fully or partly serviced arrangement (including SLAs) which have not been separately identified elsewhere in the trust's ERIC return. Where no separate breakdown is available this amount will be the total annual cost of the lease and all relevant services. Where there is an unresolved dispute between a trust and the landlord the amount to be entered is that claimed by the landlord since that is the potential maximum liability. Capital Charges - The element of depreciation & amortisation and cost of capital charges in the year relating to land, buildings and equipment relevant to the built environment. Interest on capital loans Rent & Rates Relevant Unitary Payments - payments relating to PFI/LIFT projects and services The total of S01_01 + S01_02 + S01_03 = the total estates and facilities running costs for the trust.
04	Maintenance service costs	£	Total annual revenue cost of providing building, engineering and equipment repairs and maintenance. These cost should also be included in S01_01. See Completion Note below.

Completion Note: The common elements that relate to Hard FM (Estates) and Soft FM (Hotel) services are listed below. This is not an exhaustive list and trusts should add elements as appropriate. If in

Hard FM (Estates) services

Estates and Property Management relating to implementing and managing the trust's capital programme, excluding capitalised costs and associated staff

Backlog maintenance monitoring, implementing and managing associated investment – both in terms of in-house and outsourced monitoring where applicable;

Fire Safety and Health & Safety compliance relating to the built environment - only include revenue costs, capital compliance expenditure should be excluded;

Grounds and Gardens maintenance - Include indoor plants where provided;

Electro Biomedical Equipment maintenance – Exclude cost of purchasing equipment;

Waste Disposal Services - Including costs reported in S09 as well as any others excluded by the definition;

Car Parking Services - Including all costs of providing car parking, including any payments made to companies providing parking services;

Energy Services - Including costs reported in S07 as well as any others excluded by the definition;

Water & Sewage Services - Including costs reported in S08 as well as any others excluded by the definition;

Helpdesk Service - providing staff, patients or visitors with information and support related to estates & facility services e.g. urgent cleaning or out of hours food services. This may be known by different names e.g. "service desk";

Building and Engineering repairs and maintenance relating to the built environment - Including those costs separately recorded at S01_04 as well as any others excluded by the definition;

Equipment maintenance relating to the built environment - Non-estates & facilities maintenance should be excluded;

External window cleaning - whether provided in-house or as a contracted service.

Soft FM (Hotel) services

Information Management & Technology fixed wiring systems - Include the costs relating to the provision and maintenance of and repairs to the system. The costs of providing and running these services should be excluded;

Non-emergency patient transport services - Including those specified in T04_07;

Security services - Include both in-house and out-sourced provision.

Food services - This will be S12_01 plus any additional food services costs e.g. outpatient food services. Ward hostess services should be included here;

Telecommunications– Including pager, cell phone and other related services;

Laundry and linen services - Include costs reported in S13 as well as any others excluded by the definition.

Reception services - Only include those reception services for Estates & facilities. Where reception services are provided for and by individual clinical services, e.g. orthopaedics, they should be excluded;

Portering services - Include costs reported in S14 as well as any others excluded by the definition.

Cleaning (domestic) services - including Internal window cleaning

Sterile supply services - Include the costs of sterilization and other actions on medical devices, equipment and consumables, but not the costs of purchasing sterile supplies themselves;

Courier & postal services - Include all forms of external courier or related services e.g. Post Office;

Pest control services - Including both ongoing and responsive services;

Stores services - This should include the management and provision of Estates & facilities stores only. Other stores-type services e.g. clinical and drugs, should be excluded;

Art in hospitals - This should only include art used for decoration purposes and managed by the estates & facilities function. The costs of art therapy for patients should be excluded;

Residential accommodation - Include accommodation provided for doctors and medical students;

Day nursery & crèche services - provided to trust staff.

S02. Income Generation

Ref.	Field	Unit	Definition
01	Income received for leasing out area for retail sales	£	The net revenue income received from leasing or renting out retail space to commercial organisations. Exclude space provided or rented to charitable or similar organisations such as coffee shops, newagents and food sellers, include Pharmacies when these are commercial operations unaffiliated with the NHS organisation themselves. Exclude restaurants when they are provided by the trust themselves e.g. an outsourced staff restaurant would be excluded but a coffee shop franchise would be included here.
02	Area leased out for retail sales	m2	Gross internal site floor area leased or rented out as retail space to commercial organisations. Exclude space provided or rented to charitable or similar organisations such as coffee shops, newagents and food sellers, include Pharmacies when these are commercial operations unaffiliated with the NHS organisation themselves. Exclude restaurants when they are provided by the trust themselves e.g. an outsourced staff restaurant would be excluded but a coffee shop franchise would be included here.

S03. Areas

Ref.	Field	Unit	Definition
01	Gross internal floor area	M ²	The total internal floor area of all buildings, occupied or un-occupied including temporary buildings, embedded education, training facilities, university accommodation and areas temporarily in the possession of building contractors. Exclude leased-out areas. See Completion Note below.

Completion Note:

Gross Internal Floor Area (m²) should be the overall internal floor area within the perimeter of the external walls (e.g. measuring the building or premises externally and by deducting from the overall length and width the thickness of the external walls, and then multiplying the resultant length by the resultant width (Fig 1)). Allowances should be made for projections, indentations, insets, voids and courtyards. Voids in this context are defined as:

- Voids where you cannot stand up in or are below reasonable floor to ceiling heights i.e. between floors should not be included in the GIA.
- Space classed as voids that allows access to plant equipment etc. which is not suitable for other uses other than access should also be excluded and only the plant area included.

This is repeated for each storey of the building and added together to obtain the total gross internal floor area. The floor areas of plant rooms, circulation spaces and internal walkways are included. Gross Internal Floor Area = [(A1 x B1) + (A2 x B2) + (A3 x B3)] + GIA other floors. Premises that are vacant and awaiting disposal should be excluded from the GIA figure.

Figure 1.

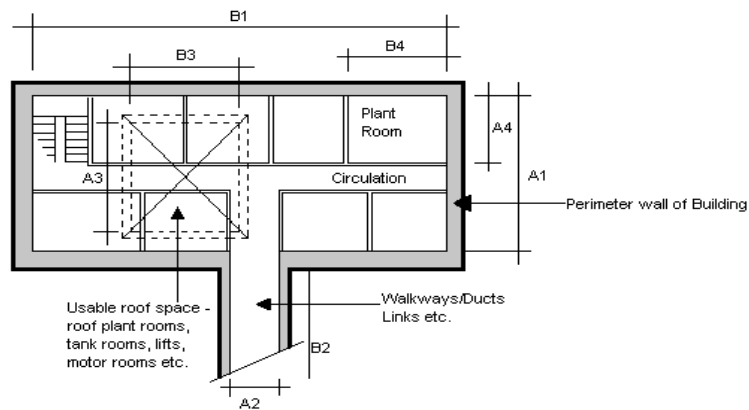
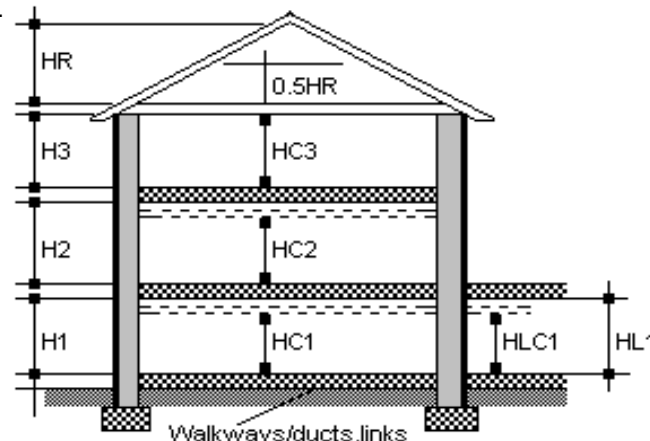


Figure 2.



02	Occupied floor area.	M ²	Total internal occupied floor area of all buildings which are in operational use and required for the purpose of delivering the function/activities of the organisation. Include leased-in areas, industrial process areas, embedded education and training facilities and university accommodation which are occupied. Measured as for the gross internal floor area, inclusive of plant rooms, and circulation spaces, but excluding multi-storey car parks and areas which are not required for operational purposes (i.e. non-occupied areas and not in use). Exclude leased-out areas. Occupied floor area (m ²) is the proportion of the gross internal floor area that is occupied by the organisation for the purpose of delivering its healthcare function, irrespective of ownership or tenure of the premises. Where areas have changed throughout the year (e.g. due to major developments or disposal) the figure quoted should be that current on 31 st March at the end of the reporting year. The occupied floor area will equal clinical space + non-clinical space + commercial and retail areas.
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03	NHS estate occupied floor area	%	Site internal occupied floor area owned by the organisation expressed as a percentage of site GIA. Include all buildings registered on the organisation's balance sheet as an NHS asset. Include PFI and LIFT schemes. The remainder of the occupied floor area being within leased or non-NHS estate property.
04	Site heated volume	M ³	Total volume of internal building space which is heated. The total internal floor area of buildings which are heated multiplied by the height between the floor surface and the room ceiling minus the floor area covered by internal walls and partitions (taken as 6%). See Completion Note below.
Completion Note:			
The Heated Volume is the total gross internal floor area which is heated, multiplied by the height between the floor surface and the room ceiling, minus the floor area covered by internal walls and partitions (taken as 6%). Heated Volume should exclude unheated spaces such as plant rooms, boiler houses, ceiling voids, pipe ducts, covered ways etc. The void above suspended ceilings (i.e. taken up to the highest point below the upper slab) should be taken into account in the calculations if the suspended ceiling is not insulated (i.e. the space above effectively shares the heat of the room space below). If the false ceiling is insulated then the void above should NOT be taken into account in the calculations. Figure 2 (in conjunction with figure 1 above) shows diagrammatically how heated volume should be calculated.			
Heated Volume = [(A1 x B1) x (HC1 + HC2 + HC3 + ...) x 0.94] + [(A2 x B2) x (HLC1 + HLC2 + ...)] See Fig. 1 (floor areas) for A1, B1, A2, B2.			
Gross Volumes with Pitched Roof = [(A1 x B1) x (H1 + H2 + H3 + ... + 0.5HR) x 0.94] + [(A2 x B2) x (HL1 + HL2 + ...)]			
Gross Volumes with Flat Roof = [(A1 x B1) x (H1 + H2 + H3) x 0.94] + [(A2 x B2) x (HL1 + HL2 + ...)] + (A3 x B3 x HR)			
NB 0.94 represents the 6% reduction in overall floor area to allow for the internal walls and partitions and 0.5HR represents a notional compensating height to allow for a pitched roof.			
05	Building footprint	M ²	Total ground floor area of all buildings, occupied or un-occupied. Owned or as defined within the terms of a lease, license, service level agreement, or tenancy agreement and operated by the organisation. Enclosed communication routes or walkways that are covered but open to the elements should be included, however, building overhangs above ground level should be excluded. Also excludes leased-out areas. For leased areas within a building the GIA should be used.
06	Site land area	Hectare	Total physical site land area either owned or as defined within the terms of a lease, license, Service Level Agreement or tenancy agreement operated by the organisation. The land area quoted should be inclusive of the building footprint. Where areas are leased within a building this should include the GIA and any other areas including external areas which are exclusively for the use of the reporting trust. For information, one hectare equals 10,000m ² .
07	Clinical space	M ²	Total internal floor area within the boundary of the hospital which provides clinical care and where patients and visitors have access, receive and recover from their treatment and are at risk. All facilities such as offices, toilets, dining rooms, and circulation spaces within the boundary of the relevant department should be included. In addition common circulation spaces (e.g. hospital street, visitors toilets, main entrance reception/waiting, stairways etc.) where patients and visitors have access outside the boundary of the departments should be included. Exclude both external car parking areas and multi-storey car parking areas. Please refer to appendix F-Areas for detailed list of areas to be included. This figure plus the total non-clinical occupied area and commercial and retail areas should equal the total occupied floor area for the site. Exclude leased-out and licensed-out areas (Not applicable to Ambulance trusts).
08	Non-clinical space	M ²	The gross internal floor area within the boundary of the hospital where non-clinical or support services are provided and/or patients and visitors do not have access. This will include administration offices, industrial processes, plant rooms, laundries. Circulation spaces where the patients and visitors do not have access should be included here. Exclude both external car parking areas and multi-storey car parking areas. Please refer to appendix F-Areas for detailed list of areas to be included. This figure plus the total clinical occupied area and commercial and retail areas should equal the total occupied floor area for the site should equal the total occupied floor area for the site. Exclude leased-out and licensed-out areas (Not applicable to Ambulance trusts).

S04. Function and Space

Ref.	Field	Unit	Definition
01	Not functionally suitable - occupied floor area	%	Percentage of occupied floor area that is below Condition B for functional suitability. The amount of area reported in S03_02 which is below an acceptable standard, or unacceptable in its present condition, or so below standard that nothing but a total rebuild will suffice. The method of collecting data in ERIC on functionally unsuitable space and unutilised is based on the Land and Property Appraisal guidance available via the ERIC downloads option within the module.
02	Not functionally suitable - patient occupied floor area	%	Percentage of patient occupied floor area that is below Condition B for functional suitability. The amount of area reported in S03_07 which is below an acceptable standard, or unacceptable in its present condition, or so below standard that nothing but a total rebuild will suffice. The
03	Floor area - empty	%	Percentage of occupied floor area where space utilisation is classified as being "empty" see Land and Property Appraisal guidance available via the ERIC downloads option within the module.

04	Floor area - under-used	%	Percentage of occupied floor area where space utilisation is classified as being "under-used" see Land and Property Appraisal guidance available via the ERIC downloads option within the module.
05	Single bedrooms for patients with en-suite facilities	No.	Number of available beds that are single bedrooms provided for patient use which have en-suite facilities. An en-suite facility can include a WC and wash handbasin only or a WC with shower/bath and wash handbasin (Not applicable to Ambulance trusts).
06	Single bedrooms for patients without en-suite facilities	No.	Number of available beds that are single bedrooms provided for patient use which do not have en-suite facilities. These are single rooms which do not include a WC and wash handbasin only or a WC with shower/bath and wash handbasin (Not applicable to Ambulance trusts).

S05. Age Profile

Ref.	Field	Unit	Definition
01	Age profile by built date	%	The percentage of the total gross internal area (GIA) of all buildings occupied by the trust, irrespective of ownership. The total of A-I must equal
01A	2015 to 2024	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 2015 - 2024
01B	2005 to 2014	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 2005 - 2014
01C	1995 to 2004	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1995 - 2004
01D	1985 to 1994	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1985 - 1994
01E	1975 to 1984	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1975 - 1984
01F	1965 to 1974	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1965 - 1974
01G	1955 to 1964	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1955 - 1964
01H	1948 to 1954	%	% of GIA associated with all buildings occupied by the Organisation that were constructed between 1948 - 1954
01I	pre 1948	%	% of GIA associated with all buildings occupied by the Organisation that were constructed before 1948

S06. Quality of Buildings

Ref.	Field	Unit	Definition
01	Cost to eradicate high risk backlog	£	The total sum (not the sum intended to be expended in the reporting year) attributable to all assets associated with property occupied at the organisation site, irrespective of ownership, that are below condition B in respect of physical condition, fire safety and statutory safety condition, and have been assessed as high risk. High risk is where repairs/replacement must be addressed with urgent priority in order to prevent catastrophic failure, major disruption to clinical services or deficiencies in safety liable to cause serious injury and/or prosecution. The sum of high, significant, moderate and low risk backlog will be the total backlog cost for the organisation site. See Completion Note below.
02	Cost to eradicate significant risk backlog	£	The total sum (not the sum intended to be expended in the reporting year) attributable to all assets associated with property occupied at the organisation site, irrespective of ownership, that are below condition B in respect of physical condition, fire safety and statutory safety condition, that have been assessed as significant risk. Significant risk is where repairs/replacement require priority management and expenditure in the short term so as not to cause undue concern to statutory enforcement bodies or risk to healthcare delivery or safety. The sum of high, significant, moderate and low risk backlog will be the total backlog cost for the organisation site. See Completion Note below.
03	Cost to eradicate moderate risk backlog	£	The total sum (not the sum intended to be expended in the reporting year) attributable to all assets associated with property occupied at the organisation site, irrespective of ownership, that are below condition B in respect of physical condition, fire safety and statutory safety condition, that have been assessed as moderate risk. Moderate risk is where repairs/replacement require effective management and expenditure in the medium term through close monitoring so as not to cause undue concern to statutory enforcement bodies or risk to healthcare delivery or safety. The sum of high, significant, moderate and low risk backlog will be the total backlog cost for the organisation site. See Completion Note below.
04	Cost to eradicate low risk backlog	£	The total sum (not the sum intended to be expended in the reporting year) attributable to all assets associated with property occupied at the organisation site, irrespective of ownership, that are below condition B in respect of physical condition, fire safety and statutory safety condition, that have been assessed as low risk. Low risk is where repairs/replacement require to be addressed through agreed maintenance programmes or included in the later years of an Estates Strategy. The sum of high, significant, moderate and low risk backlog will be the total backlog cost for the organisation site. See Completion Note below.

05	Risk adjusted backlog	£	The sum of all risk adjusted backlog costs for each building/block and external area relating to property occupied by the organisation, irrespective of ownership. This should be calculated using the formula and methodology defined within the document "A risk-based methodology for establishing and managing backlog". See Completion Note below.
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Completion Note:

Backlog should only be reported where the reporting trust is liable for the cost of backlog maintenance. The figures should be current as at the end of the reporting year 31st March.

The approach to reporting backlog maintenance costs should follow 'A risk-based methodology for establishing and managing backlog' at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/148143/Backlog_costing.pdf

This includes a detailed survey to assess the physical condition of your estate assets and their compliance with mandatory fire safety requirements and statutory safety legislation. Based on the survey findings assets and their sub elements can be allocated a condition ranking and costs to bring them up to a suitable condition (defined as condition B). A subsequent risk assessment will determine the cost figures to include in the 'backlog cost categories' (high, significant, medium and low).

Notes to Consider when Compiling Backlog Maintenance Costs

The following notes are provided to help organisations identify and report the correct figures within the ERIC return for backlog maintenance costs.

Please note that these notes are specific to backlog maintenance costs and do NOT supersede any other ERIC completion note or data entry field definition for which reporting is required on the basis of the whole of the estate occupied by the trust, inclusive of NHS and non-NHS property.

General

1. Backlog maintenance costs SHOULD be reported within the ERIC return for all property which the trust occupies, irrespective of ownership, including that associated with occupied property such as that leased from a third party landlord, local authority or University etc.
2. Assets (sub-elements) classified as being in condition B (C) must NOT be considered as backlog until such time as the condition of the asset has actually fallen to below condition B.
3. Backlog maintenance costs relate only to assets that involve achieving condition B for physical condition, fire safety and statutory safety legislation relevant to the built environment. Costs to achieve condition B relating to other aspects of the 6 facet property condition appraisal. Functional suitability, space utilisation, and environmental, should NOT be classified as backlog maintenance costs.
4. All backlog maintenance costs reported should be the WORKS COST, exclusive of any additional costs that are dependant upon the project solution taken to address the backlog. (E.g. fees, VAT, decanting and temporary service costs to other areas). Costs should be adjusted as appropriate to the 31st March 2015 using appropriate indices such as the PUBSEC index (<https://www.gov.uk/government/collections/price-and-cost-indices>). Note from October 2014 PUBSEC indices will only be available under subscription to the Building Cost Information Service. Works costs will include that which is directly related to undertaking the work. For example, should a wall have to be removed and replaced and/or pipework diverted in order to gain access to replace a major item of equipment which has fallen below condition B standards (e.g. boiler, ventilation plant etc.) then such costs SHOULD be included within the reported backlog works cost. Similarly, if a temporary boiler or alternative source of supply is needed in order to undertake the works then these costs also SHOULD be included within the backlog works cost figure. However, additional costs that are dependant upon the choice of a project to address the backlog, (e.g. incorporating as part of a major development to resolve a multitude of deficiencies of which the eradication of backlog is but one element, or to focus purely on the specific backlog element alone) should NOT be included within the ERIC reported backlog costs but SHOULD be included within any business case approval process in line with normal Capital Investment Manual or Trust standing order procedures. These costs will include fees, VAT, and costs to decant services and/or to provide temporary services to other areas. (E.g. provision of temporary ward building) the requirements of which will depend upon the chosen scheme content.
5. Backlog maintenance costs associated with property that is vacant and awaiting disposal should be EXCLUDED from the ERIC return.
6. Assets or services that are NOT currently in breach of relevant statutory requirements or DoH Firecode standards, and therefore do not place the organisation at risk of prosecution, should NOT be classified as fire safety or statutory health and safety backlog. For example, where for reasons of best practice, costs have been identified to remove asbestos lagged pipework, that is appropriately sealed, labelled and registered to the extent that it is already in compliance with statutory requirements, such costs should NOT be regarded as backlog. However, should the asbestos lagged pipework not be in compliance with statutory requirements (i.e. the lagging is loose or unmarked or non-registered) then the costs necessary to bring the element into compliance with statutory legislation, SHOULD be identified as backlog.
7. Where an asset is operational and serviceable by way of normal maintenance revenue budgets at the end of the ERIC fiscal reporting year (i.e. 31st March) and does not require capital to undertake major repair or replacement, then it is NOT to be classified as backlog. This applies even if the asset has fully depreciated.
8. Organisations should take account of assets that are forecast to fall below condition B in future years in their forward investment planning processes but should NOT classify such items as backlog for the purpose of the ERIC return unless the asset has actually fallen below condition B standards at the end of the reporting year.

S07. Energy

Ref.	Name	Unit	Definition
01	Energy cost (all energy supplies)	£	The total cost of electricity, gas, oil, and coal from all sources (including utility supplier, local source, renewable source), net of any costs that are charged to other organisations for which the trust provides energy (see apportionment rules).
02	Electricity consumed	kWh	The total amount of electricity consumed from the national / regional / local electricity supplier. Exclude energy supplied to other sites. Include energy used to feed CHP plant associated with the site, and energy used by the organisation site for processing purposes (e.g. laundry, CSD). In cases where the organisation site includes an on-site central processing unit(s) which serves more than one organisation site, the input energy to this unit should be apportioned in accordance with the percentage output used by the organisation for its own purposes. (E.g. if the organisation uses 30% of the processing unit output then the figure included should be 30% of the total amount of energy supplied to the processing unit). Exclude energy derived from an eligible renewable energy source.
03	Gas consumed	kWh	The total amount of gas consumed from the national /regional gas supplier, including LPG, net of any energy that may have been supplied by the organisation to other sites. Include energy used to feed CHP plant associated with the site, and energy used by the organisation site for processing purposes (e.g. laundry, CSD). In cases where the organisation site includes an on-site central processing unit(s) which serves more than one organisation site, the input energy to this unit should be apportioned in accordance with the percentage output used by the organisation for its own purposes. (E.g. if the organisation uses 30% of the processing unit output then the figure included should be 30% of the total amount of energy supplied to the processing unit). Exclude energy derived from an eligible renewable energy source.
04	Oil consumed	kWh	The total amount of oil consumed from the national /regional oil supplier, net of any energy that may have been supplied by the organisation to other sites. Include energy used to feed CHP plant associated with the site, and energy used by the organisation site for processing purposes (e.g. laundry, CSD). In cases where the organisation site includes an on-site central processing unit(s) which serves more than one organisation site, the input energy to this unit should be apportioned in accordance with the percentage output used by the organisation for its own purposes. (E.g. if the organisation uses 30% of the processing unit output then the figure included should be 30% of the total amount of energy supplied to the processing unit). Exclude energy derived from an eligible renewable energy source.
05	Coal consumed	kWh	The total amount of coal consumed from the national /regional coal supplier, net of any energy that may have been supplied by the organisation to other sites. Include energy used to feed CHP plant associated with the site, and energy used by the organisation site for processing purposes (e.g. laundry, CSD). In cases where the organisation site includes an on-site central processing unit(s) which serves more than one organisation site, the input energy to this unit should be apportioned in accordance with the percentage output used by the organisation for its own purposes. (E.g. if the organisation uses 30% of the processing unit output then the figure included should be 30% of the total amount of energy supplied to the processing unit). Exclude energy derived from an eligible renewable energy source.
06	Steam consumed	kWh	Total annual amount of steam consumed which has been supplied by an organisation other than Regional/National supplier sources. (E.g. a neighbouring organisation supplying steam to the site from their incinerator or central boiler plant and distribution system). Exclude energy derived from an eligible renewable energy source.
07	Hot water consumed	kWh	Total annual amount of hot water consumed which has been supplied by an organisation other than Regional/National supplier sources. (E.g. a neighbouring organisation supplying hot water to the site from their main distribution system.) Exclude energy derived from an eligible renewable energy source.
08	Electricity consumed - renewable	kWh	The total annual amount of electricity from renewable energy which has been consumed from an eligible renewable energy supply source as defined in Protocol A3 of DEFRA "Guidelines for the Measurement and Reporting of Emissions by Direct Participants in the UK Emissions Trading Scheme" (e.g. wind energy, etc.) Such energy to be exempt from the Climate Change Levy (CCL), which is evidenced by a Levy Exemption Certificate that confirms that electricity generated from qualifying renewable sources are exempt from the Levy . The sum of the utility, local and renewable electrical energy figures reported will be the total 'intake' electrical energy delivered to the site.
09	Non-fossil fuel consumed - renewable	kWh	The total annual amount of non-fossil fuel from renewable energy consumed for combustion (e.g. heating boilers) which has been supplied from an eligible renewable energy supply source as defined in Protocol A3 of DEFRA "Guidelines for the Measurement and Reporting of Emissions by Direct Participants in the UK Emissions Trading Scheme" (e.g. biomass, sewage gas, etc.) Such energy to be exempt from the Climate Change Levy (CCL), which is evidenced by a Levy Exemption Certificate that confirms that electricity generated from qualifying renewable sources are exempt from the Levy. The sum of the utility, local and renewable fossil and non-fossil energy figures reported will be the total 'intake' fossil and non-fossil energy delivered to the site.
10	Fossil energy input to CHP system/s	kWh	The total annual fossil energy supplied from regional and/or local sources to the CHP plant.
11	Thermal energy output of CHP system/s	kWh	The total useful thermal energy output, inclusive of exported thermal energy.
12	Electrical energy output of CHP system/s	kWh	The total electrical energy output, inclusive of exported electricity.

13	Exported electricity	kWh	The amount of surplus electricity in kWh produced by the trust site from CHP plant which is supplied to a utility supplier or another organisation site. Please note that the imported energy provided to other trusts completing an ERIC return should include this in their electricity consumed field.
14	Exported thermal energy	kWh	The amount of surplus thermal energy in kWh produced by the organisation site from CHP plant which is supplied to a utility supplier or another organisation site. Please note that the imported energy provided to other trusts completing an ERIC return should include this in the relevant energy field.

S08. Water Services

Ref.	Field	Units	Definition
01	Water cost	£	The total cost for water whether metered or not inclusive of bore hole, maintenance and operational costs together with billed amounts and water rates. Water costs associated with on-site central processing unit(s) (e.g. laundry) should be apportioned in accordance with the percentage output used by the trust for its own purposes. (E.g. if the trusts uses 30% of the processing unit output then the figure used should be 30% of the total cost of water supplied to the processing unit.) Where Water and Sewage costs are billed as a single amount, information on the method of calculating the separate charges should be sought from the supplier. If this is not available, trusts should provide an estimate of the split.
02	Sewage costs	£	The total sewage cost whether metered or not, inclusive of maintenance and operational costs together with billed amounts and water rates. Sewage costs associated with on-site central processing unit(s) (e.g. laundry) should be apportioned in accordance with the percentage output used by the trust for its own purposes. (E.g. if the trusts uses 30% of the processing unit output then the figure used should be 30% of the total cost of water supplied to the processing unit.) Where Water and Sewage costs are billed as a single amount, information on the method of calculating the separate charges should be sought from the supplier. If this is not available, trusts should provide an estimate of the split.
03	Water volume	M ³	Annual amount of water consumed, supplied either by the national/regional supplier or locally from another organisation (e.g. trust). Include water supplied from a 'borehole'. Water to on-site central processing unit(s) (e.g. laundry) should be apportioned in accordance with the percentage output used by the organisation for its own purposes. (E.g. if the trust uses 30% of the processing unit output then the figure used should be 30% of the total amount of water supplied to the processing unit.)

S09. Waste

Ref.	Field	Units	Definition
01	Clinical waste cost	£	The off site disposal cost of clinical waste including transport. Exclude on site collection and handling costs associated with moving waste to a central collection point. Details of the classifications and EWC codes can also be found in Appendix H-Waste codes and the help option within the module. See Completion Note below.
02	Clinical waste volume	Tonnes	Clinical waste volume produced. Where the weight is not available from the contractor an assessment should be made using available information e.g. average weight of bag multiplied by the number of bags per annum. Details of the classifications and EWC codes can also be found in Appendix H-Waste Codes and the help option within the module. See Completion Note below.
03	Special waste cost	£	Cost of off site disposal including transport. Exclude on site collection and handling costs associated with moving waste to a central collection point. Details of the classifications and EWC codes can also be found in Appendix H-Waste Codes and the help option within the module. See Completion Note below.
04	Special waste volume	Tonnes	Special waste produced regardless of type. Where the weight is not available from the contractor an assessment should be made using available
05	Domestic waste cost	£	Cost of off site disposal of domestic waste including transport. Exclude on site collection and handling costs associated with moving waste to a central collection point. Details of the classifications and EWC codes can also be found in Appendix H-Waste Codes and the help option within the module. See Completion Note below.

06	Waste recovery/recycling cost	£	Percentage of the total domestic/commercial waste cost that is attributable to recovered/recycled waste.
Completion Note:			
ERIC waste classification: The classification of waste in ERIC is for the purposes of data collection only, and does not affect any legal or regulatory requirements. The three types used: Clinical, Domestic and Special are defined as:			
<ul style="list-style-type: none"> • Special waste – This is waste with hazardous properties which may render it harmful to human health or the environment; • Clinical waste - This is waste produced as a result of clinical activity, excluding Special waste; • Domestic waste – This waste other than Special and Clinical Waste. 			
The total Special, Clinical and Domestic waste should represent the total waste produced by trust before any of it is recovered or recycled.			
Please note that the definitions used are being reviewed and may be amended for the 2016-17 ERIC collection.			
The list below details the elements of the waste classifications in ERIC using the EWC codes. This list should not be considered as complete as there may be waste produced locally that is not specifically mentioned. In these cases, the overarching definitions used above should be applied. The analysis is based Health Technical Memorandum 07-01: Safe management of healthcare waste.			
Clinical Waste			
Medicines other than those that are cytotoxic and cytostatic/18 01 09, 18 02 08, 20 1 32			
Medicines other than those that are cytotoxic and cytostatic/20 01 32			
Non-medicinally-contaminated sharps/20 01 99			
Other clinical infectious waste arising from healthcare activities/20 01 99			
Special Waste			
Non-infectious anatomical waste - chemicals present/18 01 02 and 18 01 06, 18 02 03 and 18 02 05			
Cytotoxic and cytostatic medicines/18 01 08, 18 02 07, 20 01 31			
Infectious anatomical waste - no chemicals present/18 01 03, 18 02 03			
Cytotoxic and cytostatic sharps/18 01 03* and 18 01 08, 18 02 02 and 18 02 07			
Infectious anatomical waste - chemicals present/18 01 03* and 18 01 06, 18 02 02 and 18 02 05			
Other medicinally contaminated sharps/18 01 03* and 18 01 09, 18 02 02 and 18 02 08			
Other clinical infectious waste - containing chemicals/18 01 03* and 18 01 06, 18 02 02 and 18 02 05			
Non-medicinally-contaminated sharps/18 01 03*, 18 02 02			
Infectious gypsum (plaster)/18 01 03*			
Other clinical infectious waste arising - from healthcare activities/18 01 03*, 18 02 02			
Infectious waste containing - dental amalgam/18 01 03* and 18 01 10			
Healthcare chemicals without hazardous – properties/18 01 06, 18 02 05			
Dental amalgam/18 01 10			
X-ray fixer and developer/09 01 01, 09 01 02, 09 01 03, 09 01 04, 09 01 05			
Cytotoxic and cytostatic medicines/20 01 31			
Domestic waste			
Non-infectious anatomical waste, no chemicals present/18 01 02, 18 02 03			
Sharps not contaminated with body fluids or medicines/18 01 01, 18 02 01			
Non-infectious gypsum (plaster) wastes/18 01 04			
Offensive/hygiene waste/18 01 04, 18 02 03			
Mixed municipal waste/20 03 01			
Healthcare chemicals without hazardous properties/18 01 07, 18 02 06			

S10. Car Parking

Ref.	Field	Unit	Definition
01	Parking spaces available	No.	The total number of car parking spaces available for patients, visitors and staff including disabled spaces. This includes multi-storey and open car parks and any temporary car parks. Where a trust leases space from another trust they should only report those spaces which are exclusively for the use of their patients, visitors and staff. Exclude residential parking.
02	Designated disabled parking spaces	No.	The total number of designated disabled car parking spaces for patients, visitors and staff. This includes multi-storey and open car parks and any temporary car parks. Where a trust leases space from another trust they should only report those spaces which are exclusively for the use of their patients, visitors and staff.
03	Average fee charged per hour for patient/visitor parking	£	The average hourly charge based on the cost of a 3 hour stay. For example a 3 hour stay costs £5.00 average hourly charge = £1.67. Where a trust leases space from another trust they should only report charges for those spaces which are exclusively for the use of their patients and visitors. For aggregated sites, the figure entered should be that of the hospital site with the highest charge. Information and advice on operating
04	Average fee charged per hour for staff parking	£	The average hourly charge (including pro-rata charge made for parking permits) per hour levied on staff members for parking. For aggregated sites, the figure entered should be that of the hospital site with the highest charge. Where a trust leases space from another trust they should only report charges for those spaces which are exclusively for the use of their staff. In cases where a daily, weekly or monthly cost is charged then the costs should be apportioned based on a 12 hour day for comparison purposes. For example, a charge of £2.40 per day would be divided by 12 to provide an hourly rate of £0.20.
05	Is there a charge for disabled parking	Yes/No	All trusts should answer regardless of who own/manages car parking spaces. (Not applicable to Ambulance trusts).

S11. Cleaning

Ref.	Field Name	Unit	Definition
01	Cleaning service cost	£	Total annual pay and non-pay cost of cleaning services. Include deep cleaning, internal window cleaning, labour, and material costs for all directly employed and contract staff including contract support costs, fees, equipment, consumables, uniform costs, and any pay elements for Directors, senior managers associated in cleaning the organisations premises. Include the relevant portion of other staff e.g. nurses, radiographers, housekeepers and estates staff costs associated with cleaning services. Includes internal window cleaning. Exclude the cost of provision of any cleaning services to tenants, leased-out property and other organisations. The costs of external window cleaning should be excluded but note these costs should be reported in S01_01.
02	Cleaning staff	WTE	The total number of cleaning staff as a whole time equivalent of all staff (directly employed and contracted out staff), undertaking cleaning work for the organisation site. Exclude managers, administrative and supervisory staff who do not physically carry out the cleaning function.
03	Routine cleaning method/s	Yes/No	Please select the cleaning method/s used within clinical areas. Where two or more methods are commonly used please select all that apply: <ul style="list-style-type: none"> • Traditional wet-mopping (disposable) • Traditional wet-mopping (reusable) • Microfibre (disposable) • Microfibre (reusable) • Disposable wipes • Other
04	Enhanced cleaning method/s	Yes/No	Please select the enhanced cleaning method/s used within clinical areas e.g. for infected areas, terminal cleaning etc. Where two or more methods are commonly used please select all that apply: <ul style="list-style-type: none"> • Steam Cleaning • Hydrogen peroxide fogging • UV Light • Chlorine-releasing cleaner • Sporicidal cleaner • Other
05	Cleaning audit processes	Yes/No	Please select the audit process/es used within clinical areas. Where two or more methods are commonly used please select all that apply: <ul style="list-style-type: none"> • Visual audits based on the National Specification for Cleanliness or Publicly Available Specification • Visual audits based on an alternative Specification to the National Specification for Cleanliness or Publicly Available Specification • ATP Swab Testing • UV light Testing • Microbiological Swab Testing • Other

06	Cost of cleaning occupied floor area assessed as Red/Very High risk	£	Cost of cleaning the occupied floor area assessed as Red Risk (PAS) or Very High Risk (NSC) areas for cleanliness. This should be based on assessment of risk using the National Specification for Cleanliness (NSC) (http://www.nrls.npsa.nhs.uk/resources/?EntryId45=59818) or the Publicly Available Specification (PAS) (http://shop.bsigroup.com/ProductDetail/?pid=00000000030292594). Where the precise cost is not known a 'best estimate' should be used. The occupied floor area is that entered at S03_02. Note: The sum of S11_06, 10, 14 and 18 should equal S11_01.
07	Occupied floor area assessed as Red/Very High risk	%	The percentage of occupied floor area assessed as Red Risk (PAS) or Very High Risk (NSC) for cleanliness. This should be based on assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise percentage is not known a 'best estimate' should be used. Occupied floor area is that entered at S03_02, and the sum of S11_07, 11, 15 and 19 should equal 100%.
08	Required standard for occupied floor area assessed as Red/Very High risk	%	Based on the audit standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
09	Achieved standard for occupied floor area identified as Red/Very High risk	%	Based on the average of the past 12 months audit outcomes based on the standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
10	Cost of cleaning occupied floor area assessed as Amber Risk/High and Significant risk	£	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise cost is not known a 'best estimate' should be used. The occupied floor area is that entered at S03_02. Note: The sum of S11_06, 10, 14 and 18 should equal S11_01. See Completion Note below.
11	Occupied floor area assessed as Amber/High and Significant risk	%	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise percentage is not known a 'best estimate' should be used. Occupied floor area is that entered at S03_02, and the sum of S11_7, 11, 15 and 19 should equal 100%. See Completion Note below.
12	Required standard for occupied floor area assessed as Amber/High and Significant risk	%	Based on the audit standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
13	Achieved standard for occupied floor area identified as Amber/High and Significant risk	%	Based on the average of the past 12 months audit outcomes based on the standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
14	Cost of cleaning occupied floor area assessed as Green/Low risk	£	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise £ is not known a 'best estimate' should be used. The Occupied Floor Area is that entered at S03_02. Note: The sum of S11_06, 10, 14 and 18 should equal S11_01. See Completion Note below.
15	Occupied floor area assessed as Green Risk/Low risk	%	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise % is not known a 'best estimate' should be used. Occupied Floor Area is that entered at S03_02, and the sum of S11_07, 11, 15 and 19 should equal 100%. See Completion Note below.
16	Required standard for occupied floor area assessed as Green/Low Risk	%	Based on the audit standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
17	Achieved standard for occupied floor area identified as Green/Low risk	%	Based on the average of the past 12 months audit outcomes based on the standard defined in the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS) for occupied areas risk assessed as requiring cleaning to this standard. See Completion Note below.
18	Cost of cleaning the occupied floor area not requiring regular cleaning	£	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise £ is not known a 'best estimate' should be used. The occupied floor area is that entered at S03_02. The sum of S11_06, 10, 14 and 18 should equal S11_01. See Completion Note below.
19	Occupied floor area not requiring regular cleaning	%	Based on the assessment of risk using the National Specification for Cleanliness (NSC) or the Publicly Available Specification (PAS). Where the precise percentage is not known a 'best estimate' should be used. The occupied floor area is that entered at S03_02, and the sum of S11_07, 11, 15 and 19 should equal 100%. See Completion Note below.

Completion Note:

References to Red, Amber or Green risk refer to the Publicly Available Specification (PAS) classifications and references to Very High, High, Significant and Low risk refer to the National Specifications for Cleanliness (NCS) classifications. S110_03 to S11_19 not applicable to Ambulance trusts and aggregate site returns.

S12. Inpatient food services

Ref.	Field	Unit	Definition
01	Inpatient food services cost	£	Total gross pay and non-pay costs for the provision of inpatient services. Make an apportionment for staff that carry out tasks between patient & non-patient areas. Include the costs of provisions including food, beverages, special diets and ward provisions such as bread, milk, coffee. Include costs related to Assisted Daily Living or similar self catering arrangements. Include total gross labour costs for the inpatient food service, employers national insurance contributions, bonus & overtime payments for all staff employed, including food production, service staff, general assistants, generic workers, staff employed to regenerate food at ward level & agency costs incurred to deliver the catering service to inpatients. Include the costs for the distribution and collection of patient meals and direct ward issues/locally held supplies to patient areas. Exclude parental and enteral feeding, baby milk and nutritional supplements such as sip feeds. (Not applicable to Ambulance trusts).
02	Inpatient main meals requested	No.	Total annual inpatient meals ordered from wards and departments. An inpatient meal is defined as either a breakfast, midday or evening meal order (or any substitute or alternative for any such meals) received from an inpatient (wards and departments) or the number of similar meals provided to wards and departments as an estimate of need where order systems are not in use. Where self catering arrangements are in place estimate the number of meals by reference to average bed occupancy rates. (Not applicable to Ambulance trusts).
03	Cost of feeding one inpatient per day (patient meal day)	£	The average daily cost for the provision of all meals and beverages fed to one inpatient per day. The cost should include all pay and non-pay, including provisions, ward issues, disposables, equipment and its maintenance. Include provisions and equipment costs related to Assisted Daily Living or similar self catering arrangements. This is not the average cost for a single meal but for all meals and beverages delivered to the patients in one day (Not applicable to Ambulance trusts).

S13. Laundry & Linen

Ref.	Field Name	Unit	Definition
01	Laundry and linen services cost	£	Total annual pay and non-pay cost of laundry and linen services. Include all labour, purchasing and material costs, fees, contract support costs, uniforms, equipment maintenance and renewal, and consumables, associated with directly employed and contracted out staff that provide the service. Also include disposables, transport, collection and distribution to the point of use and replacement and repairs. In Assisted Daily Living or similar arrangements include the cost of equipment and consumables used by patients. Exclude the cost of providing laundry and linen services to other organisations (see apportionment rules) and personal linen and laundry services undertaken by clients/patients.
02	Laundry and linen pieces per annum	No.	Number of laundry and linen pieces, including disposables laundered. Exclude laundry and linen pieces provided to other organisations (see apportionment rules) and personnel linen and laundry services undertaken by clients/patients. Pieces can include, amongst others, sheets, pillow cases or patient gowns.
03	Laundry and linen service used	Select	Please select the method used for your laundry and linen service; <u>1. Full Service – Contracted</u> – all linen supplies and all subsequent laundering is provided under a single contract with an external contractor including another trust. Note: under this arrangement the trust may purchase small amounts of disposables but the bulk of the provision and laundering will be subject to the contract <u>2. Full Service – In House</u> – all linen supplies and all subsequent laundering is undertaken by the trust. Note: This includes where laundering takes place off site but in a facility owned by the Trust (e.g. at another hospital in the same trust) and where patients undertake their own laundering as part of an ADL or similar arrangement <u>3. Hybrid</u> – linen and laundry services are a combination of in-house and contracted services e.g. the trust may purchase all supplies but all laundering is undertaken by a contractor including another trust

S14. Portering Service

Ref.	Field Name	Unit	Definition
01	Portering service cost	£	Total pay and non-pay cost of portering services. Include all patient and non patient transport/movement services e.g. linen and goods and any other functions e.g security where these are provided by portering staff. Exclude costs related to portering services provided by other staff groups. Include all directly employed and contract staff including contract support costs, fees, consumables, uniform costs, and any pay elements for Directors, senior managers associated with the portering service.
02	Portering staff	WTE	The number whole time equivalent portering staff providing services such as all patient and non patient transport/movement services such as linen and goods and any other functions e.g security where these are provided by portering staff.

S15. PFI Facilities and Services (THIS SECTION SHOULD ONLY BE COMPLETED IF THE TRUST HAS A SCHEME OPERATED UNDER A PFI CONTRACT)

Please see worksheet Appendix D-PFI Calcs for details on how the data items below fit together to give the total costs of the PFI Scheme.

Ref.	Field Name	Unit	Definition
01	Occupied floor area	m ²	Total internal occupied floor area of buildings operated under the PFI scheme as defined in the PFI contract. Calculation of this space should be consistent with the overall definition of occupied floor area as set out in S03_02.
02	Financing cost	£	Total annual revenue cost of the financing element of the PFI contract. This represents the non-estates & facilities related costs of the PFI contract, both in terms of what is paid to the PFI contractor and what is charged in the Income and expenditure account e.g. capital charges. Therefore, it does not include the Hard FM and Soft FM costs below. It should include the finance lease cost, interest charge (or interest expense), repayment of finance lease liability and lifecycle costs, however accounted for. If separate insurance has been taken out as part of PFI contract, the cost of this should be included. In addition, capital charges and related costs should be included as reported in the Income and expenditure account. Amounts charged to the balance sheet should not be included.
03	Income offset against contract	£	Total annual revenue income received by the PFI contractor and offset against the cost of the scheme. Include all income regardless of source received by the PFI contractor directly or indirectly e.g. car parking income. Where income is received in relation to the scheme and not offset against the PFI scheme costs of the trust it should be excluded. This should exclude income or costs included under S15_04 Costs to other users. Note even though this sum is deducted from the PFI costs, it should be recorded as positive here.
04	Cost to other users	£	Total annual revenue costs passed on to other users of the PFI scheme. This cost represents the amount of the total costs of the PFI scheme that are passed on to other users of the scheme building for areas not used by the reporting trust. The other users can be trusts, local authorities or any other organisations. This should exclude any costs or income recorded under S15_03 income offset against contract. Note even though this sum is deducted from the PFI costs, it should be recorded as positive here.
PFI contractor provided services			
05	Hard FM (Estates) costs	£	Total annual revenue cost of the Hard FM (Estates) services under the PFI contract not included in S15_07 - S15_09 below. Include all materials and equipment necessary to provide the Hard FM services together with costs associated with relevant Directors time, management, supervisors, trade staff and administrative support employed by the PFI contractor.
06	Soft FM (Hotel services) costs	£	Total annual revenue cost of the Soft FM (Hotel Services) services under the PFI contract not already included S15_10 - S15_13 below. Include all materials and equipment necessary to provide the Soft FM services together with costs associated with relevant Directors time, management, supervisors, trade staff and administrative support employed by the PFI contractor.
07	Maintenance services costs	£	Total annual revenue cost of providing building, engineering and equipment repairs and maintenance under the PFI contract relating only to the built environment.
08	Energy costs (all energy supplies)	£	Total annual cost of energy consumed in buildings operated under the PFI contract. Include electricity, gas, oil, and coal from all sources (utility supplier, local source, renewable source) purchased by the PFI contractor for this scheme (see apportionment rules).
09	Waste cost- PFI contractor provided	£	Total annual cost of the disposal of all waste under the PFI contract. Cost of off site disposal including transport. Exclude on site collection and handling costs associated with moving waste to a central collection point.
10	Cleaning service cost	£	Total pay and non-pay cost of cleaning services under the PFI contract. Include deep cleaning, internal window cleaning, labour, and material costs for all directly employed and contract staff including contract support costs, fees, equipment, consumables, uniform costs, and any pay elements for Directors, senior managers associated in cleaning the trust's premises. Include the relevant portion of other staff e.g. nurses, radiographers, housekeepers and estates staff costs associated with cleaning services. Includes internal window cleaning. Exclude the cost of provision of any cleaning services to tenants, leased-out property and other organisations. The costs of external window cleaning should be excluded but note these costs should be reported in S15_05.
11	Inpatient food service cost	£	Total gross pay and non-pay costs for the provision of the inpatient food service under the PFI contract. Make an apportionment for staff that carry out tasks between patient & non-patient areas. Include the costs of provisions including food, beverages, special diets and ward provisions such as bread, milk, coffee. Include costs related to Assisted Daily Living or similar self catering arrangements. Include total gross labour costs for the inpatient food service, employers national insurance contributions, bonus & overtime payments for all staff employed, including food production, service staff, general assistants, generic workers, staff employed to regenerate food at ward level & agency costs incurred to deliver the catering service to inpatients. Exclude parental and enteral feeding, baby milk and nutritional supplements such as sip feeds. Exclude the costs for the distribution and collection of patient meals and direct ward issues/locally held supplies to patient areas.
12	Laundry and linen service cost	£	Total pay and non-pay cost of laundry and linen services under the PFI contract. Include all labour and material costs, fees, contract support costs, uniforms, equipment maintenance and renewal, and consumables, associated with directly employed and contracted out staff that provide the service. Also include disposables, transport, collection and distribution to the point of use and replacement and repairs. In Assisted Daily Living or similar arrangements include the cost of equipment and consumables used by patients.

13	Portering service cost	£	Total pay and non-pay cost of portering services for the movement of patients and goods provided under the PFI contract. Include all patient and non patient transport/movement services e.g. linen and goods and any other functions e.g security where these are provided by portering staff. Exclude costs related to portering services provided by other staff groups. Include all directly employed and contract staff including contract support costs, fees, consumables, uniform costs, and any pay elements for Directors, senior managers associated with the portering service.
Trust provided services			
014	Other Hard FM (Estates) costs	£	Total annual revenue cost of the Hard FM (Estates) services provided by the trust to the PFI scheme not included in S15_16 - S15_18 below. Include all materials and equipment necessary to provide the Hard FM services together with costs associated with relevant Directors time, management, supervisors, trade staff and administrative support employed by the trust but provided to the PFI scheme.
015	Other Soft FM (Hotel Services) costs	£	Total annual revenue cost of the Soft FM (Hotel Services) services provided by the trust to the PFI scheme not included in S15_19 - S15_22 below. Include all materials and equipment necessary to provide the Soft FM services together with costs associated with relevant Directors time, management, supervisors, trade staff and administrative support employed by the trust but provided to the PFI scheme.
016	Maintenance service costs	£	Total annual revenue cost of provided for building, engineering and equipment repairs and maintenance by the trust to the PFI scheme relating only to the built environment.
017	Energy costs (all energy supplies)	£	Total cost of energy consumed in buildings provided by the trust to the PFI scheme. Include electricity, gas, oil, and coal from all sources (utility supplier, local source, renewable source) purchased by the trust but provided to the PFI scheme. (see apportionment rules).
018	Waste cost	£	Total cost of disposal of all waste provided by the trust to the PFI scheme. Cost of off site disposal including transport. Exclude on site collection and handling costs associated with moving waste to a central collection point.
019	Cleaning service cost	£	Total pay and non-pay cost of cleaning services provided by the trust to the PFI scheme. Include deep cleaning, internal window cleaning, labour, and material costs for all directly employed and contract staff including contract support costs, fees, equipment, consumables, uniform costs, and any pay elements for Directors, senior managers associated in cleaning the trust's premises. Include the relevant portion of other staff e.g. nurses, radiographers, housekeepers and estates staff costs associated with cleaning services. Includes internal window cleaning. Exclude the cost of provision of any cleaning services to tenants, leased-out property and other organisations. The costs of external window cleaning should be excluded but note these costs should be reported in S15_14.
020	Inpatient food service cost	£	Total gross pay and non-pay costs for the provision of the inpatient food service provided by the trust to the PFI scheme. Make an apportionment for staff that carry out tasks between patient & non-patient areas. Include the costs of provisions including food, beverages, special diets and ward provisions such as bread, milk, coffee. Include costs related to Assisted Daily Living or similar self catering arrangements. Include total gross labour costs for the inpatient food service, employers national insurance contributions, bonus & overtime payments for all staff employed, including food production, service staff, general assistants, generic workers, staff employed to regenerate food at ward level & agency costs incurred to deliver the catering service to inpatients. Exclude parental and enteral feeding, baby milk and nutritional supplements such as sip feeds. Exclude the costs for the distribution and collection of patient meals and direct ward issues/locally held supplies to patient areas.
021	Laundry and linen service cost	£	Total pay and non-pay cost of laundry and linen services provided by the trust to the PFI scheme. Include all labour and material costs, fees, contract support costs, portering, uniforms, equipment maintenance and renewal, and consumables, associated with directly employed and contracted out staff that provide the service. Include also disposables, transport, collection and distribution to the point of use and replacement and repairs. Exclude the cost of providing laundry and linen services to other organisations (see apportionment rules) and personnel linen and laundry services undertaken by clients/patients.
022	Portering service cost	£	Total pay and non-pay cost of portering services for the movement of patients and goods provided by the trust to the PFI scheme. Include all patient and non patient transport/movement services e.g. linen and goods and any other functions e.g security where these are provided by portering staff. Exclude costs related to portering services provided by other staff groups. Include all directly employed and contract staff including contract support costs, fees, consumables, uniform costs, and any pay elements for Directors, senior managers associated with the portering service.

Supplementary Information

Background

This document provides background and additional information on the sections within the ERIC return and why the data is collected.

T01. Trust Profile

Data on the types of hospitals which comprise the NHS is important in ensuring central understanding and planning. It also feeds into other national planning tools such as SHAPE. The definitions below may not always directly agree with those used locally, e.g. Community Hospital (with inpatient beds), but they have been developed in order to ensure a consistent approach and are also used in the PLACE process to facilitate data linkage.

T02. Strategies and Policies

This section aims to establish the position of trusts in relation to ascertain strategies and policies they are expected to implement. It is used centrally for assurance purposes by both the Department of Health and regulators (CQC, Monitor etc).

T03. Contracted Out Services

Data on contracted out services provides a national picture on how estates and facilities services are being provided, and how this compares with previous years. It additionally allows comparisons between trusts and help identify where efficiencies can be made or where good practice exists which others may benefit from.

T04. Finance

This section collects data on financial issues related to estates and facilities functions. The amount of capital spent on estates and facilities is collected in T04_01, 02, 03 and 04 and the total should equal all capital spent in the reporting period. The sum entered as "Investment to reduce backlog maintenance" (T04_05) may also represent part of the sums entered under T04_01, 02, 03 and 04, but will represent only the amount specifically spent to reduce Backlog.

The "Cost to meet NHS Premises and Facilities Assurance action plan" represents the estimated revenue (as opposed to capital costs) of implementing the action plan during the coming financial year | i.e. for the 2015-16 collection this will be sum identified for expenditure during 2016-17.

Sections T04_08, 09 and 10 represent the income received by a trust from the provision of services to others. Catering and Laundry & Linen have been separately identified since these represent areas of significant income/potential income, but any other income derived from other services should also be included within T04_10.

T05. Safety

Until 2015-16, this area (T05_01-02) requested data on fire related incidents. It has now been redefined and extended to include more than the narrow range of fire-related incidents given there are other potential areas of risk. The Health & Safety Executive (HSE) guidance has been used here to avoid devising new definitions. However, only estates and facilities related incidents should be reported here and other types of incident excluded.

T05_03 "Clinical service incidents caused by estates and infrastructure failure" refers to incidents which cause or lead to loss of clinical services. Such incidents will include, but are not limited to:

- Power and/or heating failures including overheating;
- Fires and false alarms (where caused by equipment faults or malfunction, deliberate/malicious causes should be excluded);
- Water and/or sewage supply;
- Food production and/or delivery;
- Pest control.

S01. Facilities Management (FM) Services

The purpose of this data is separate the costs of running the estate and provision of facilities into those which are directly related to the Estate (Hard and Soft Facilities Management (FM)) and those related to the financing of the estate since FM costs are in general controlled by Directors of Estates & Facilities whereas financing costs are managed by Directors of Finance.

The specific data items S01_01, 02 and 03 should, when added together, represent the total cost of a trust's estate and facilities including all PFI, LIFT, lease and rental costs. As such this total will be used to measure the overall level of efficiency of the Trust when compared with the area used to deliver its services and the activity going through it. It should be noted that S01_03 should also be used to record any costs for and services covered by this collection provided by a landlord, whether public (e.g. NHS PS) or private as part of a lease or other agreement but which cannot be separately identified.

S02. Income Generation

Income Generation relates to a situation where a trust earns income from outside the NHS. The data collected allows the Department of Health to understand the level of income being received, and individual trusts to determine if they are receiving comparable amounts for any space they lease out. It also shows other trusts which are not leasing out space for retail purposes what they might receive and also which trusts they may be able to approach for advice.

S03. Areas

As well as providing a national picture on the size of the estate and the uses to which it is put, and on the efficient use of the estate, this data is important for the calculation of many benchmarking reports which many trusts use/reply on. These include, but are not limited to:

- Total Estates & Facilities Running costs
- Cleaning costs
- Energy usage
- Critical Infrastructure costs

The intention of collecting data relating to clinical and non-clinical areas is to improve the productivity and efficiency of the usage of the NHS estate.

The floor area is divided into three areas as follows:

- **Clinical space** – Areas directly related to the provision of clinical services and where patients and visitors have access, receive and recover from their treatment and are at risk;
- **Non-clinical space** – Areas where non-clinical or support services are provided and/or patients and visitors do not have access, and;
- **Commercial and retail space** – Where the trust earns income from external sources, both people and organisations, from commercial activities both directly (the trust receives the income) or indirectly (the trust leases out areas to commercial organisations e.g. shops).

The services detailed in appendix F-Areas include those provided for acute, mental health and community patients. However, this data is being collected for mental health and community trusts for analysis purposes as there is no target etc. related to it at this time. Common circulation spaces (e.g. hospital street, visitors toilets, main entrance reception/waiting, stairways etc.) should be assigned to clinical and non-clinical based on whether patients and visitors have access outside the departments (= clinical space). Areas can only be in one of the classifications above so that the total occupied floor area equals the clinical space + non-clinical space + commercial and retail areas.

Given that the basic cost of providing both clinical and non-clinical occupied floor area is the same, the higher the proportion used for patients the more efficient is its use. It is recognised that some areas are not relevant to the clinical/non-clinical space split and are therefore excluded. This currently covers only commercial and retail areas. Where areas are used for both trust and commercial or retail services these areas should be apportioned on the basis of the costs of each service area.

S04. Function and Space

The first four data items in this section are different from other sections since they are based on an assessment (based on the land and Property Appraisal guidance) of how space is being used rather than an actual/measurable figure. Because of the subjective nature of these data items it is important that trusts take all reasonable steps to ensure that figures reported are as accurate/realistic as possible and that the published guidance is adhered to. Particular attention should be paid to the figures reported for “Not functionally suitable” or “Floor Area - Under-used” where zero % returns would be extremely unlikely since, for example, it would be unusual for a site to be fully utilised without any available decant space.

S05. Age Profile

The age profile of the estate is important in providing a central understanding of the trend in the age of the wider estate, and also in terms of interpreting other metrics and as part of profiling a site or trust. For instance, it would be generally expected that the older the age profile the higher the (relative) backlog maintenance and running costs. Where this is not the case then it could reveal good practice, inefficiencies or other factors of interest/concern.

S06. Quality of Buildings

Backlog maintenance represents the amount of capital expenditure needed to bring the estate up to a defined standard. Details of how to calculate the figures are set out in “A risk based methodology for establishing and managing backlog” available via the ERIC downloads option within the EFM on-line module. It includes safety and service resilience related backlog Critical Infrastructure Risk (CIR). The metrics that are produced from this data include:

- Total Backlog/Area - This metric allows backlog maintenance levels to be compared between different trusts; the higher it is the lower the relative quality of a trust's estate.
- Critical Infrastructure Risk (CIR) - represents safety and service resilience risks to patients, visitors and staff.

S07. Energy

Please see the attached Appendix C-Energy calculations for details on energy and emissions calculations. This data is used for several purposes including improving efficiency and productivity and in support of the Government's Climate Change Act legal requirements around both adaptation and carbon reduction.

S08. Water Services

This section has been amended to separate water and sewage costs in order to allow the relative costs to be identified.

S09. Waste

Data relating to waste produced by the NHS is important since it is not only a significant cost to the NHS but also since it links to sustainability and climate change issues. The data items have been amended to reflect that identification of volumes is not always possible for some types of waste.

ERIC waste classification: The classification of waste in ERIC is for the purposes of data collection only, and does not affect any legal or regulatory requirements. The three types used: Clinical, Domestic and Special are defined as:

- Special waste – This is waste with hazardous properties which may render it harmful to human health or the environment;
- Clinical waste - This is waste produced as a result of clinical activity, excluding Special waste;
- Domestic waste – This waste other than Special and Clinical Waste.

The total Special, Clinical and Domestic waste should represent the total waste produced by trust before any of it is recovered or recycled.

Please note that the definitions used are being reviewed and may be amended for the 2016-17 ERIC collection.

S10. Car Parking

Car parking is a high-profile issue and availability of data is important for both the public, media and centrally. It is important that trusts provide accurate data and consider the effect of local changes from year-to-year. This is especially relevant to the “average fee” figures as they immediately show where increases in charges have occurred. This data is used centrally by the Department to understand the national position and also to inform policy development e.g. the NHS Car Parking Principles.

S11. Cleaning

Cleaning is a critical element of estates and facilities services since it not only impacts on public perception but also relates to infection control. Previous data has not provided a clear understanding of how investment in cleaning relates to quality, which is an important factor in deciding how best to provide/resource the service. Similarly, because some 90% of cleaning costs are made up by staff costs this is an area which is very sensitive to adjustment, and changes in practice can have significant effects on costs.

If available funds are to be targeted to deliver effective, efficient services, there needs to be certainty that cleaning resources are allocated with due regard to risk. High-risk areas, such as intensive care and operating theatres, may need to be prioritised over low-risk areas such as admin offices and this will be reflected in the cost per square metre. Similarly cleaning methods can also have an effect on both costs and outcomes. Gathering information on costs, methods and quality of outcomes when allied to variable factors such as a site's age/profile and purpose (e.g. acute/mental health) will enable a range of assumptions to be tested and fed back to the NHS to support better decisions on the deployment of cleaning services to attain quality outcomes.

S12. Inpatient food services

Please see the attached Appendix E for a spreadsheet to assist in calculation of the data in this section. As an area of significant expenditure and interest data is collected to ensure hospital catering services are being efficiently provided. This data can also be linked to other data such as that provided through PLACE and the CQC inpatient survey to provide a better understanding of cost/quality. This section relates only to inpatient food provision and excludes any provision of food to outpatients as well as staff and visitors food.

S13. Laundry & Linen

This data supports comparisons across trusts in relation to the cost efficiency and productivity programme showing whether there are any significant differences between differing types of service provision.

S14. Portering Service

Allocation/use of portering resources has been shown to provide scope for significant efficiency savings, and this data will help trusts identify whether they are using their resources efficiently in relation to other trusts.

S15. PFI Facilities and Services (Only to be completed by Trusts with a PFI scheme)

Please see the attached Appendix D for details on how the data items below fit together to give the total costs of the PFI Scheme.

This section should only be completed by trusts with PFI schemes. Data is now collected here in relation to PFI schemes from the Trusts that contract them. If your Trust does not contract for a PFI scheme, it does not need to complete this section. The DH will reconcile data provided in this section against central records of PFI schemes to ensure that data is provided for all PFI schemes. All figures should be as stated in the Trusts Financial Accounts and FTC forms and should be agreed with your trust finance colleagues before submission.

Data is collected on PFI schemes in ERIC to allow a better understanding of their costs and efficiencies to be developed. This includes the identification of the actual estates & facilities costs of the PFI scheme against the financing costs. The first of these is generally the responsibility of the estates & facilities team while the second is generally handled by finance teams. Following discussions with NHS colleagues, the approach to collecting data on PFI schemes has been changed from 2014-15:

- Data is being collected on a scheme basis from the Trusts that own the PFI rather than on a site basis, and;
- In some cases trusts provides services to PFI schemes that are not charged for and not part of the Unitary Charge e.g. energy. To get the full cost of the PFI, this additional cost is now being collected in this section.

Appendix A - Data provided by NHS Property Services Ltd. (NHS PS)

For the 2015/16 reporting period, NHS PS have committed to providing organisations with the data they need to complete this return. All organisations who lease properties/areas and/or receive services from NHS PS should therefore contact them to obtain all available relevant data and include this in their ERIC return. If you encounter problems regarding the availability of this data please contact NHS PS directly at information@property.nhs.uk.

S01. Facilities Management (FM) Services

Ref.	Field	Unit	NHS PS	CHP
01	Hard FM (Estates) costs	£	Will be provided in full	Cannot be provided for all sites
02	Soft FM (Hotel Services) costs	£	Will be provided in full	Cannot be provided for all sites
03	Estates and Facilities finance costs	£	Will endeavour to provide- seeking clarification from finance	Cannot be provided for all sites
04	Maintenance service costs	£	Will endeavour to provide- seeking clarification from finance	Cannot be provided for all sites

S02. Income Generation

Ref.	Field	Unit	NHS PS	CHP
01	Income received for leasing out area for retail sales	£	Not reported by NHSPS - tenant issue	Not applicable
02	Area leased out for retail sales	m2	Not reported by NHSPS - tenant issue	Not applicable

S03. Areas

Ref.	Field	Unit	NHS PS	CHP
01	Gross internal site floor area	M ²	Will provide in full	Can be provided
02	Occupied floor area	M ²	Will provide in full	Can be provided
03	NHS estate occupied floor area	%	Will provide in full	Not applicable
04	Site heated volume	M ³	Not collected so cannot provide	Cannot provide
05	Building footprint	M2	Will provide in full	Can be provided
06	Site land area	Hectare	Will provide in full	Can be provided
07	Patient occupied floor area	M ²	Tenant to provide	Tenant to provide
08	Non-patient occupied floor area	M ²	Tenant to provide	Tenant to provide

S04. Function and Space

Ref.	Field	Unit	NHS PS	CHP
01	Not functionally suitable - occupied floor area	%	Tenant to provide	Tenant to provide
02	Not functionally suitable - patient occupied floor area	%	Tenant to provide	Tenant to provide
03	Floor Area - empty	%	Tenant to provide	Tenant to provide
04	Floor Area - under-used	%	Tenant to provide	Tenant to provide
05	Single bedrooms for patients with en-suite facilities	No.	Tenant to provide	Tenant to provide
06	Single bedrooms for patients without en-suite facilities	No.	Tenant to provide	Tenant to provide

S05. Age Profile

Ref.	Field	Unit	NHS PS	CHP
	Age profile by built date		Will provide in full	Can be provided
01A	2015 to 2024	%	Will provide in full	Can be provided
01B	2005 to 2014	%	Will provide in full	Can be provided
01C	1995 to 2004	%	Will provide in full	Can be provided
01D	1985 to 1994	%	Will provide in full	Can be provided
01E	1975 to 1984	%	Will provide in full	Can be provided
01F	1965 to 1974	%	Will provide in full	Can be provided
01G	1955 to 1964	%	Will provide in full	Can be provided
01H	1948 to 1954	%	Will provide in full	Can be provided
01I	pre 1948	%	Will provide in full	Can be provided

S06. Quality of Buildings

Ref.	Field	Unit	NHS PS	CHP
01	Cost to eradicate high risk backlog	£	New surveys being undertaken, may not be available by ERIC deadline	Not applicable - LIFT model doesn't included this
02	Cost to eradicate significant risk backlog	£	New surveys being undertaken, may not be available by ERIC deadline	Not applicable - LIFT model doesn't included this
03	Cost to eradicate moderate risk backlog	£	New surveys being undertaken, may not be available by ERIC deadline	Not applicable - LIFT model doesn't included this
04	Cost to eradicate low risk backlog	£	New surveys being undertaken, may not be available by ERIC deadline	Not applicable - LIFT model doesn't included this
05	Risk adjusted backlog	£	New surveys being undertaken, may not be available by ERIC deadline	Not applicable - LIFT model doesn't included this

S07. Energy

Ref.	Name	Unit	NHS PS	CHP
01	Energy cost (all energy supplies)	£	Will provide in full where applicable	Can be provide where applicable
02	Electricity consumed	kWh	Will provide in full where applicable	Can be provide where applicable
03	Gas consumed	kWh	Will provide in full where applicable	Can be provide where applicable
04	Oil consumed	kWh	Will provide in full where applicable	Can be provide where applicable
05	Coal consumed	kWh	Will provide in full where applicable	Can be provide where applicable
07	Steam consumed	kWh	Will provide in full where applicable	Can be provide where applicable
08	Hot water consumed	kWh	Will provide in full where applicable	Can be provide where applicable
09	Electricity consumed - renewable	kWh	Will provide in full where applicable	Can be provide where applicable
10	Non-fossil fuel consumed - renewable	kWh	Will provide in full where applicable	Can be provide where applicable
11	Fossil energy input to CHP system/s	kWh	Will provide in full where applicable	Can be provide where applicable
12	Thermal energy output of CHP system/s	kWh	Will provide in full where applicable	Can be provide where applicable
13	Electrical energy output of CHP system/s	kWh	Will provide in full where applicable	Can be provide where applicable
14	Exported electricity	kWh	Will provide in full where applicable	Can be provide where applicable
15	Exported thermal energy	kWh	Will provide in full where applicable	Can be provide where applicable

S08. Water Services

Ref.	Field	Units	NHS PS	CHP
01	Water cost	£	Will provide in full	Can be provided
02	Sewage costs	£	Will provide in full	Can be provided
03	Water volume	M ³	Will provide in full	Can be provided

S09. Waste

Ref.	Field	Units	NHS PS	CHP
01	Waste cost	£	Will provide in full	Can be provided
02	Clinical waste volume	Tonnes	Cannot provide	Cannot provide
03	Special waste cost	Tonnes	Cannot provide	Cannot provide
04	Special waste volume	Tonnes	Cannot provide	Cannot provide
05	Domestic waste cost	Tonnes	Cannot provide	Cannot provide
06	Waste recovery/recycling cost	Tonnes	Cannot provide	Cannot provide

S10. Car Parking

Ref.	Field	Unit	NHS PS	CHP
01	Parking spaces available	No.	Will provide in full	Can be provided
02	Designated disabled parking spaces	No.	Will provide in full	Can be provided
03	Average fee charged per hour for patient/visitor parking	£	Tenant to provide unless managed by NHSPS	Tenant to provide unless managed by LIFT Co
04	Average fee charged per hour for staff parking	£	Tenant to provide unless managed by NHSPS	Tenant to provide unless managed by LIFT Co
05	Do you charge for disabled parking	Yes/No	Tenant to provide unless managed by NHSPS	Tenant to provide unless managed by LIFT Co

S11. Cleaning

Ref.	Field Name	Unit	NHS PS	CHP
01	Cleaning services costs	£	Will provide in full	Cannot provide
02	Cleaning staff	WTE	Will provide where provided by NHSPS	Cannot provide
03	Routine cleaning method/s	Check	Cannot provide	Cannot provide
04	Enhanced cleaning method/s	Check	Cannot provide	Cannot provide
05	Cleaning audit processes	Yes/No	Cannot provide	Cannot provide
06	Cost of cleaning occupied floor area assessed as Red/Very	£	Cannot provide	Cannot provide
07	Occupied floor area assessed as Red/Very High Risk	%	Cannot provide	Cannot provide
08	Required standard for occupied floor area assessed as	%	Cannot provide	Cannot provide
09	Achieved standard for occupied floor area identified as	%	Cannot provide	Cannot provide
10	Cost of cleaning occupied floor area assessed as Amber	£	Cannot provide	Cannot provide
11	Occupied floor area assessed as Amber/High and Significant	%	Cannot provide	Cannot provide
12	Required standard for occupied floor area assessed as	%	Cannot provide	Cannot provide
13	Achieved standard for occupied floor area identified as	%	Cannot provide	Cannot provide
14	Cost of cleaning occupied floor area assessed as Green/Low	£	Cannot provide	Cannot provide
15	Occupied floor area assessed as Green Risk/Low Risk	%	Cannot provide	Cannot provide
16	Required standard for occupied floor area assessed as	%	Cannot provide	Cannot provide
17	Achieved standard for occupied floor area identified as	%	Cannot provide	Cannot provide
18	Cost of cleaning the occupied floor area not requiring regular	£	Cannot provide	Cannot provide
19	Occupied floor area not requiring regular cleaning	%	Cannot provide	Cannot provide

S12. In-patient food services

Ref.	Field	Unit	NHS PS	CHP
01	In-patient food services cost	£	Will provide where NHPSPS provides service	Cannot provide
02	In-patient main meals requested	No.	Will provide where NHPSPS provides service	Cannot provide
03	Cost of feeding one in-patient per day (patient meal day)	£	Will provide where NHPSPS provides service	Cannot provide

S13. Laundry & Linen

Ref.	Field Name	Unit	NHS PS	CHP
01	Laundry and linen services cost	£	Will provide where NHPSPS provides service	Cannot provide
02	Laundry and linen pieces per annum	No.	Will provide where NHPSPS provides service	Cannot provide
03	What laundry and linen service do you use?	Select	Will provide where NHPSPS provides service	Cannot provide

S14. Portering (internal patient and goods transport) services costs

Ref.	Field Name	Unit	NHS PS	CHP
01	Portering services costs	£	Will provide where NHPSPS provides service	Cannot provide
02	Portering staff	WTE	Will provide where NHPSPS provides service	Cannot provide

Appendix B - Apportionment Examples

Where sites are shared with other organisations, the Apportionment Rules should be applied.

Where organisation sites or services are shared with other organisations, the **Apportionment Rules** should be applied. The following provides some examples on the methodology to be used in establishing the apportioned figures. In circumstances where apportionment is not clear (e.g. shared car parking), then organisations should take a pragmatic and common sense approach in agreeing the extent of shared figures to which each party can enter into their ERIC return.

A. ORGANISATION SITE FLOOR AREA (m²)

This is the Floor Area of buildings or premises or part therein occupied and operated by an ORGANISATION SITE and is either owned or as defined within the terms of a lease, license, Service Level Agreement, or tenancy agreement.

1. For ORGANISATION SITES within the same organisation sharing the same physical buildings and premises i.e. no other organisation sharing the same buildings and premises, the organisation will apportion and assign the floor area between each of the ORGANISATION SITES as ORGANISATION SITE FLOOR AREA (m²) as appropriate.
2. For ORGANISATION SITES being leased or licensed, the ORGANISATION SITE FLOOR AREA is as defined within the demise of the lease, Service Level Agreement, license or tenancy agreement. In the case of multiple ORGANISATION SITES for the same organisation sharing the leased or sublet premises, apply the same apportionment rules as for (1) above.
3. The Floor Area of an ORGANISATION SITE which is leased or licensed out must NOT be included in the return of the lesser organisation.

B. ORGANISATION SITE LAND AREA (Ha)

This is the physical site land area that is occupied and operated by the ORGANISATION SITE. It is the land portion either owned or as defined within a lease, license, Service Level Agreement or tenancy agreement and is inclusive of land covered by the buildings and premises which form the ORGANISATION SITE.

1. For ORGANISATION SITES within the same organisation and sharing the same physical site land area i.e. no other organisation sharing on the same physical site land area, the organisation will apportion and assign the physical site land area between each of the ORGANISATION SITES as ORGANISATION SITE LAND (Ha) as appropriate.
2. For ORGANISATION SITES being leased from another organisation, the physical site land area is as defined within a lease, license, Service Level Agreement, or tenancy agreement. In the case of multiple ORGANISATION SITES for
3. The physical site land area of an ORGANISATION SITE which is leased to another organisation must not be included in the return of the lesser organisation.

C: WHOLE TIME EQUIVALENT (WTE) AND SERVICE COSTS

Where staff are multi-skilled and share time to a range of non-clinical services then the overall time, in WTE, should be apportioned accordingly for each service in order to derive relevant labour costs.

Costs relating to a particular service which is managed at trust level (e.g. a number of the trusts sites are maintained from a workforce based at a central site), should be apportioned between individual sites in a manner that reflects the most accurate results for each site. For most cases it is anticipated that costs will be apportioned according to labour and materials allocated to a particular service on a specific site, or on an average cost per square metre basis. However, for some services such as telecommunications it might be more appropriate to apportion costs in relation to the amount of telephone traffic associated with each site.

D. ENERGY (kWh) and ENERGY COSTS (£)

This is the Energy Usage and Cost of Usage for an ORGANISATION SITE.

National/Regional Company Sources denotes an energy service provided by the utility services sector.

Combined Heat and Power (CHP) denotes an energy service provided by on site generator plant (normally with heat recovery) that is either owned or is the subject of a lease and/or supply agreement with a third party company. Where the CHP is the subject of a Contract Energy Management scheme, then please provide relevant CHP data apportioned to that which serves the organisation.

Locally supplied energy denotes an energy supply to the ORGANISATION SITE provided directly from another ORGANISATION SITE belonging to either within the reporting organisation or another organisation within or outside of the NHS (i.e. not a utility supplier).

Exported energy (electricity or thermal) denotes that which has been produced by on-site CHP or other plant and exported from an ORGANISATION SITE to a utility supplier or another ORGANISATION SITE. Energy produced by CHP or other plant which has been used to directly supply other ORGANISATION SITES should be classified as locally supplied energy in the ERIC return for the other 'importing' ORGANISATION SITE. Where a commercial plant, located on an ORGANISATION SITE affords the commercial company an opportunity to export power to entities other than ORGANISATION SITES (i.e. the National Grid, local regional electricity company etc.), the appropriate adjustments will be required to ensure that only energy usage and associated cost of usage pertinent to the ORGANISATION SITE(S) is recorded.

Renewable energy denotes that which is supplied to the ORGANISATION SITE from an eligible renewable supply source as defined in Protocol A3 of the DEFRA document "Guidelines for the Measurement and Reporting of Emissions by Direct Participants in the UK Emissions Trading Scheme". Renewable energy will be exempt from the Climate Change Levy and assumed to have nil impact on CO₂e emissions.

Process energy denotes that which has been supplied to an on-site central industrial processing unit (e.g. CSSD, laundry, incinerator, manufacturing pharmacy etc.) That serves a number of ORGANISATION SITES.

Rule 1. For ORGANISATION SITES within the same organisation where energy is being fully supplied from utility, CHP, or locally supplied sources, i.e. no other organisation sharing the same buildings and premises, the organisation will apportion and assign the energy usage and cost of usage between each of the ORGANISATION SITES as appropriate.

Rule 2. For ORGANISATION SITES being leased from another organisation, the energy usage and cost of usage is that which has been supplied to the ORGANISATION SITE from utility, CHP or locally supplied sources in accordance with the terms of the lease, Service Level Agreement, or tenancy agreement. In the case of multiple ORGANISATION SITES for the same organisation sharing the leased or sublet premises, apply the same apportionment rules as for (1) above.

Rule 3. The energy usage and cost of usage of an ORGANISATION SITE which is leased to another organisation must not be included in the return of the lesser organisation.

Rule 4. Where metered or measurable supply figures are not available, agreed estimates both of energy usage and cost must be established between supplying and receiving ORGANISATION Site's, especially for inter-organisation supply.

EXAMPLES - ENERGY - APPORTIONMENT RULES [Note: For simplicity, energy costs taken as 10 pence/kWh for all energy sources.]

Example 1. ORGANISATION SITE “A” and ORGANISATION SITE “B” take their energy from National/Regional company sources. Intake meter readings for ORGANISATION SITE “A” is 5,000,000 kWh of electricity at a cost of £500,000. Intake meter readings for ORGANISATION SITE “B” is 2,500,000 kWh of electricity at a cost of £250,000.

ORGANISATION SITE “A” will report National/Regional company sources electric kWh as 5,000,000 kWh and National/Regional company sources electric £ as £500,000.

ORGANISATION SITE “B” will report National/Regional Company sources electric kWh as 2,500,000 kWh and National/Regional company sources electric £ as £250,000.

Example 2. ORGANISATION SITE “A” takes its energy from National/Regional company sources and its intake meter reading is 4,000,000 kWh of electricity at a cost of £400,000. The energy distribution system of ORGANISATION SITE “A” also sub-feeds ORGANISATION SITE “B”. Energy metered by ORGANISATION SITE “A” indicates that 1,500,000 kWh has been supplied to ORGANISATION SITE “B” with a charged Cost of £150,000.

ORGANISATION SITE “A” will report National/Regional company sources electric kWh as 2,500,000 kWh (4,000,000 – 1,500,000) and National/Regional company sources electric £ as £250,000 (400,000 – 150,000).

ORGANISATION SITE “B” will report locally supplied electricity as 1,500,000 kWh and locally supplied electricity £ as £150,000.

Example 3. ORGANISATION SITE “A” takes its energy from metered National/Regional company sources and its intake meter reading is 30,000,000 kWh of gas at a cost of £3,000,000, 12,500,000 kWh of electricity at a cost of £1,250,000 and is operating a Combined Heat and Power installation fuelled by gas. The CHP installation supplies 800,000 kWh of electricity, at a charged Cost of £80,000, and 2,000,000 kWh of hot water, at a charged cost of £200,000, to ORGANISATION SITE “B”. ORGANISATION SITE “A” used 8,000,000 kWh of gas in generating the supplied electricity and hot water kWh.

ORGANISATION SITE “A” will report:-

National/Regional company sources electricity kWh as 12,500,000 kWh and National/Regional company sources electricity £ as £1,250,000.

National/Regional company sources gas kWh as 30,000,000 kWh and National/Regional company sources gas £ as £2,720,000 [3,000,000 – (80,000 + 200,000)].

Exported CHP electricity as 800,000 kWh and exported CHP thermal as 2,000,000 kWh.

Total fossil energy to the CHP system as 8,000,000 kWh.

ORGANISATION SITE “B” will report local sources electric kWh as 800,000 kWh and local sources electric £ as £80,000, and local sources hot water kWh as 2,000,000 kWh and local sources hot water £ as £200,000.

Example 4. ORGANISATION SITE “A” has an incinerator on site, which is owned, managed and operated by a commercial company. ORGANISATION SITE “A” total Gas intake from the National/Regional supplier is 40,000,000 kWh at a cost of £4,000,000. ORGANISATION SITE “A” supplies 100% of the incinerators gas intake of 2,500,000 kWh. In exchange, the commercial company supplies 15,000,000 kWh of hot water to ORGANISATION SITE “A” free of charge.

ORGANISATION SITE “A” will report:-

National/Regional company sources Gas kWh as 37,500,000 kWh (40,000,000 – 2,500,000).

National/Regional company sources gas £ as £4,000,000.

Locally supplied hot water as 15,000,000 kWh.

Locally supplied hot water cost as zero.

Example 5. ORGANISATION SITE “A” takes its energy from metered National/Regional company sources and its intake meter reading is 35,000,000 kWh of gas at a cost of £3,500,000, and 14,000,000 kWh of electricity at a cost of £1,400,000. The organisation site has a central laundry of which 25% of its output is used by the organisation site and 75% by other organisation sites. The total electricity supplied to the laundry is 1,500,000 kWh at a cost of £150,000 together with 16,000,000 kWh of steam energy at a cost of £1,600,000.

ORGANISATION SITE “A” will report:-

National/Regional company sources electricity kWh as 12,875,000 kWh [14,000,000 – (1,500,000 * 0.75)] and National/Regional company sources electricity £ as £1,287,500 [1,400,000 – (150,000 * 0.75)].

National/Regional company sources gas kWh as 23,000,000 kWh [35,000,000 – (16,000,000*0.75)] and National/Regional company sources gas £ as £2,300,000 [3,500,000 – (1,600,000 *0.75)].

Appendix C - Energy and Emissions Calculations

1. The following worked example explains the energy and emissions calculations within the ERIC system. Whilst the Energy and emissions calculations are consistent with the SDU sustainability reporting template the ERIC system currently only stores one set of conversion factors that are applied across all calculations regardless of year. Users are therefore encouraged to use the SDU template for more detailed energy and carbon requirements and to take account of local circumstances.

<http://www.sduhealth.org.uk/resources/>

2. Where applicable the apportionment rules should be applied before undertaking the calculations.

3. Locally supplied fuel (steam, hot water) from another organisation and CHP exported thermal has a primary energy correction factor of 0.8 (i.e. 80% boiler/CHP efficiency) to reflect generation etc. losses. i.e. to produce 10,915,000 kWh of local hot water would have required 13,643,750 kWh (10,915,000/0.8) of input energy. Please note separate conversion factors are now available for CHP and these are available within the SDU template.

4. The following conversion factors are provided for use in completion of this return.

GJ = 0.0036 * kWh

GJ = 0.1055 * therm (gas)

GJ = 0.0381 * ltr (oil)

GJ = 28.4 * tonne (coal)

GJ = lb / 1024 (steam)

1kWh = 0.03412 therm gas = 3.3 Cu.ft of gas = 0.093 Cu.Metre (m³) of gas.

1 Tonne - 1,000 Kg = 2,204.62 pounds.

1 Cu.m (m³) = 1,000 Ltrs = 219.97 gallons

1 Sq.m (m²) = 10.764 Sq.ft.

1 metre = 1.094 yards.

1 Hectare = 2.47 Acres = 10,000 Sq.m

10 Cu.m of bin volume = approx. 1 Tonne of waste (or 1 Cu.m volume = 100 Kg waste)

Energy and Emissions Calculations: worked example

Performance Divisibles

Heated volume (m3)	211,761	Occupied floor area (m2)	78,430
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Electricity	GJ	kWh	Conversion	CO ₂ e Emission	Notes
A Utility Electricity	11,585	3,218,056	0.54509	1,754,130	
B Local Electricity	11,116	3,087,778	0.54509	1,683,117	
C Renewable Energy (Electricity)	1,000	277,778	0	0	Assumed to be emission free
D CHP Electrical Output (kWh)		810,415	0	0	Emissions are included within input energy
E CHP Exported Electricity (kWh)			0.54509	0	CHP exported electricity is excluded from consumption calculations

Electrical Energy Performance	Result	Unit	Calculation
F Total electricity consumed	7,394,026	kWh	=(A+B+C+D)-E
G Total electricity consumed / occupied floor area	94.3	kWh/m ²	=F / 78,430

Thermal	GJ	kWh	Conversion	CO ₂ e Emission	Notes
H Utility Gas	51,470	14,297,222	0.18523	2,648,274	
J Utility Oil	426	118,333	0.26592	31,467	
K Utility Coal	-	-	0.32227	0	
L Renewable Energy (non-fossil fuel)	10,000	2,777,778	0	0	
M Local Steam	-	-	0.2315375	0	
N Local Hot Water	39,294	10,915,000	0.2315375	2,527,232	
O CHP Thermal Output (kWh)		1,402,469		0	Assumed included in utility energy
P CHP Fossil Energy Input (kWh)		2,648,381	0.2315375	613,200	
Q CHP Exported Thermal (kWh)			0.2315375	0	

Thermal Energy Performance		Result	Unit	Calculation	Notes
R	Total thermal energy consumed	26,862,421	kWh	= (Sum(H to O)) - (Q+P)	
S	Total thermal energy consumed / occupied floor area	343	kWh/m ²	= R / 78,430	

Consumed Energy Performance		Result	Unit	Calculation	Notes
T	Total energy consumed = F+R	34,256,447	kWh	= F + R	
U	Total energy consumed / (100m ³ /Heated volume)	16,177	KWh/100m ³	= T / (100 / 78,430)	
V	Total energy consumed / occupied floor area	437	kWh/m ²	= T / 78,430	

CO ₂ e Emissions		Calculation	Unit	Result	Notes
W	CO ₂ e Emissions Electrical	= (A+B) - E	kg	3,437,247	
X	CO ₂ e Emissions Thermal	= H+J+K+M+N-Q	kg	5,206,973	
Y	Total CO ₂ e Emissions	= W + X	kg	8,644,220	
Z	Total CO ₂ e Emissions per occupied floor area	= Y / 78,430	kgCO ₂ e/m ²	110.22	
A1	Total CO ₂ e Emissions	= Y / 1000	Tonnes	8,644	
B1	Carbon Emissions	= A1 * (12/44)	Tonnes	2,358	
C1	Carbon emissions per occupied floor area	= 1000 * (B1 / 78,430)	kg/m ²	30	

Appendix D - S15. PFI Facilities and Services

PLEASE NOTE: Any queries relating to this toolkit must be directed to Mike Bellas at the Department of Health. Email: mike.bellas@dh.gsi.gov.uk or Tel: 01132545757

1. The collection of ERIC data for PFI schemes has been amended for 2015-16 to reflect feedback from the NHS collected as part of the Lord Carter Efficiency work. The intention is to use this data to calculate metrics to allow different types of PFI sites to be compared for efficiency of Estates & Facilities. This exercise assumes that PFI schemes in the NHS are based on the following models:

- Model 1 - Trust wide PFI scheme
 - o Unitary Charge paid to the PFI contractor, inclusive of all costs e.g. interest charge;
 - o Trust may pay directly for some services supporting the PFI scheme e.g. energy.
- Model 2 - Trust wide PFI scheme
 - o Unitary Charge paid to the PFI contractor, inclusive of all costs e.g. interest charge;
 - o Costs or payments made for the PFI contract outside of Unitary Charge e.g. capital charges;
 - o Trust may pay directly for some services supporting the PFI scheme e.g. energy.
- Model 3 - Trust have both PFI scheme and Non-PFI estate;
 - o Unitary Charge paid to the PFI contractor, inclusive of all costs e.g. interest charge;
 - o Trust may pay directly for some services supporting the PFI scheme e.g. energy.
- Model 4 - Trust have both PFI scheme and Non-PFI estate;
 - o Unitary Charge paid to the PFI contractor, inclusive of all costs e.g. interest charge;
 - o Costs or payments made for the PFI contract outside of Unitary Charge e.g. capital charges;
 - o Trust may pay directly for some services supporting the PFI scheme e.g. energy.

2. Each NHS Trust should report for the PFI scheme which it contracts for. Separate entries should be provided for each scheme, if a single PFI scheme covers multiple sites, only one entry should be made.

3. The intention is to obtain the total costs of running each PFI scheme. In some cases, it is recognised that some services are provided for the PFI scheme by the Trust directly e.g. energy, and not included in the Unitary Charge paid to the PFI contractor. To get the actual total cost of the PFI scheme these should be added in the appropriate section below.

4. For the purposes of this exercise "Unitary Charge" is used to define the total amount paid to the PFI contractor as for the scheme regardless of how it is accounted for in the Trusts Income and Expenditure Account. See S15_02 for details of Financing Costs to include.

5. Where possible the Unitary Charge elements should be broken down into the elements requested e.g. energy. However, where this is not possible, either because the data is not available from the PFI contractor or the contract does not break it down, please include it in the "Other estates costs of the PFI scheme not included in the above" line.

6. Where income is received by the PFI contractor that is offset (and therefore reduced) the Unitary Charge paid by the Trust it should be deducted from the gross cost of Unitary Charge at "Income offset against the PFI costs e.g. retail rental income".

7. In some cases, Trusts may lease out parts of their PFI scheme to other NHS Trusts or other organisations for income. Where this occurs, the cost of the element leased out should be deducted from the overall cost of the scheme at "apportionment of costs at site not used for Trust patient activity (i.e. space used by other NHS providers)".

8. After deducting the amount noted at 7 above, the remainder should be the equivalent of what the Trust has included in their ERIC return at "Total Cost of the PFI site used for Trust patient activity - agrees with 014-15 ERIC data".

9. The "Occupied Floor Area of PFI scheme (to agree to "Total cost of the PFI scheme / PFI Site")" should be the area that matches that of the PFI scheme being paid for at "Total cost of the PFI scheme / PFI Site (both PFI provided and NHS Trust provided)". This will allow the costs for each PFI scheme per area to be calculated and compared.

£

Payments made to the PFI contractor by the Trust:

S15_07 Maintenance service costs - PFI Contractor provided	0
S15_08 Energy cost (all energy supplies)- PFI Contractor provided	0
S15_09 Waste cost- PFI Contractor provided	0
S15_05 Other Hard FM estates costs of the PFI scheme not included in the above- PFI Contractor provided	0
Hard FM PFI Total	0

S15_10 Cleaning services costs - PFI Contractor provided	0
S15_11 Cost of in-patient food services- PFI Contractor provided	0
S15_12 Laundry and linen services cost- PFI Contractor provided	0
S15_13 Portering (internal patient transport) services costs- PFI Contractor provided	0
S15_06 Other Soft FM estates costs of the PFI scheme not included in the above- PFI Contractor provided	0
Soft FM Total	0

Less: S15_03 Income offset against the PFI costs e.g. retail rental income	0
S15_02 Financing or associated costs e.g. availability fee, service charges, interest charges, lifecycle costs and debt repayment	0
Total PFI Unitary charges	0

Payments made by the NHS Trust for the PFI scheme

S15_16 Maintenance service costs - NHS Trust provided	0
S15_18 Waste cost- NHS Trust provided	0
S15_17 Energy cost (all energy supplies)- NHS Trust provided	0
S15_14 Other Hard FM estates costs of the PFI scheme not included in the above- NHS Trust provided	0
Hard FM PFI Total	0

S15_19 Cleaning services costs - NHS Trust provided	0
S15_20 Cost of in-patient food services- NHS Trust provided	0
S15_21 Laundry and linen services cost- NHS Trust provided	0
S15_22 Portering (internal patient transport) services costs- NHS Trust provided	0
S15_15 Other Soft FM estates costs of the PFI scheme not included in the above- NHS Trust provided	0
Soft FM Total	0

Total Trust costs of running the PFI scheme (NHS Trust Provided) 0

Total cost of the PFI scheme / PFI Site (both PFI provided and NHS Trust provided) 0

Less: S15_04 apportionment of costs at site not used for Trust patient activity (i.e. space used by other NHS providers) 0

Total Cost of the PFI site used for Trust patient activity - agrees with 2014-15 ERIC data. 0

S15_01 Occupied Floor Area of PFI scheme (to agree to "Total cost of the PFI scheme / PFI Site") 0

Appendix E - Cost of Feeding Inpatients calculator

PLEASE NOTE THE FIGURES ENTERED BELOW ARE FOR EXAMPLE PURPOSES ONLY AND CAN BE OVER-WRITTEN ACCORDINGLY. THE SPREAD SHEET HASN'T BEEN PROTECTED TO ALLOW FURTHER CHANGES TO BE MADE.

Central Production Unit	£	PFI Contracts						Service Level Agreement (SLA)				Contract One	Contract Two	Other Contracts	Total Value / %
		Hospital One	Hospital Two	Hospital Three / Café One	Hospital Four (PFI 1)	Hospital Five (PFI 2)	Hospital Six (PFI 3)	Premise One	Premise Two	Premise Three	Premise Four				
Food Production Staff Breakdown		27%	11%	1%	5%	30%	2%	5%	4%	2%	2%	6%	1%	4%	100%
Total Staff Budget (Excl Supervisor)	£100.00	£27.00	£11.00	£1.00	£5.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£1.00	£4.00	£100.00
Total WTE (Excl Supervisor)	100	27.00	11.00	1.00	5.00	30.00	2.00	5.00	4.00	2.00	2.00	6.00	1.00	4.00	100.00
Management Costs															
HoD or Line Manager (Actual cost not full salary)	£100.00	£27.00	£11.00	£1.00	£5.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£1.00	£4.00	£100.00
Line Manager (Actual cost not full salary)	£100.00	£27.00	£11.00	£1.00	£5.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£1.00	£4.00	£100.00
Supervisor	£100.00	£27.00	£11.00	£1.00	£5.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£1.00	£4.00	£100.00
Sub Total	£300.00	£81.00	£33.00	£3.00	£15.00	£90.00	£6.00	£15.00	£12.00	£6.00	£6.00	£18.00	£3.00	£12.00	£300.00
Additional Costs		27%	11%	1%	5%	30%	2%	5%	4%	2%	2%	6%	1%	4%	100%
Provisions	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Hardware And Crockery	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Dietetic Products	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Catering Equipment - Purchase	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Catering Equipment - Disposable	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Catering Equipment - Maintenance	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
External Contracts : Catering	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Staff Uniforms And Clothing	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Protective Clothing	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Cleaning Equipment	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Cleaning Materials	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Laundry Equipment	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Other General Supplies and Services	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Stationary	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
On-Call Mobile Phones	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Travel and Subsistence	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Training and Travel Subsistence	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Staff Lease Cars	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Taxi and Other Vehicle Hire	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Contract: Pest Control	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Furniture and Fittings	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Office Equipment and Materials: Purchase	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Office Equipment and Materials : Repairs	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Computer Hardward Purchases	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Computer Software / Licence Fees	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Computer Maintenance	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Materials - Electrical	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Miscellaneous Expenditure	£100	£27	£11	£1	£5	£30	£2	£5	£4	£2	£2	£6	£1	£4	£100
Sub Total	£2,800	£756	£308	£28	£140	£840	£56	£140	£112	£56	£56	£168	£28	£112	£2,800
Direct Food Delivery Transport Costs		27%	11%	0%	6%	30%	2%	5%	4%	2%	2%	6%	0%	5%	100%
Vehicle Running Costs : Fuel	£100	£27.00	£11.00	£0.00	£6.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£0.00	£5.00	£100.00
Vehicle Maintenance	£100	£27.00	£11.00	£0.00	£6.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£0.00	£5.00	£100.00
Staff Costs (Drivers)	£100	£27.00	£11.00	£0.00	£6.00	£30.00	£2.00	£5.00	£4.00	£2.00	£2.00	£6.00	£0.00	£5.00	£100.00
Sub Total	£300	£81	£33	£0	£18	£90	£6	£15	£12	£6	£6	£18	£0	£15	£300.00
		Hospital One	Hospital Two	Hospital Three / Café One	Hospital Four (PFI 1)	Hospital Five (PFI 2)	Hospital Six (PFI 3)	Premise One	Premise Two	Premise Three	Premise Four	Contract One	Contract Two	Other Contracts	Total Value / %
Ward Issued Provisions - Food items		£100.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£100.00
Food Cost (Staff/Management/Additional/Delivery)		£945.00	£385.00	£32.00	£178.00	£1,050.00	£70.00	£175.00	£140.00	£70.00	£70.00	£210.00	£32.00	£143.00	£3,500.00
Deduct cost of Catering staff taking up food trolleys		(£100.00)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	-£100.00
Other - housekeeping / ward hostess staff costs		£100.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£100.00
Total Costs		£1,045.00	£385.00	£32.00	£178.00	£1,050.00	£70.00	£175.00	£140.00	£70.00	£70.00	£210.00	£32.00	£143.00	£3,600.00
Total Meals Produced	100														
Patient Meal Numbers	100	27	11	1	5	30	2	5	4	2	2	6	1	4	100
Average															
Cost per patient meal	£34.93	£38.70	£35.00	£32.00	£35.60	£35.00	£35.00	£35.00	£35.00	£35.00	£35.00	£35.00	£32.00	£35.75	
Average															
Patient Meal Day Cost	£104.78	£116.11	£105.00	£96.00	£106.80	£105.00	£105.00	£105.00	£105.00	£105.00	£105.00	£105.00	£96.00	£107.25	

Do the staff on this site:
Serve patient meals?
Serve patient beverages?

Colour Code Key

	These boxes are self populating sums and require no data input
	These boxes are self populating sums and require no data input
	Apportioned cost of highlighted staff member. Not full salary unless based 100% at site
	Cost taken straight from budget line or similar cost.
	Input a figure only (no % symbol needed) that breakdowns the percentage of main meals ordered per location. A different figure can be entered for additional costs and / or delivery dependent on local information.
	These boxes use the % figure to calculate costs but if required directly input cost

Inpatient food service cost: Total gross pay and non-pay costs for the provision of inpatient services. Make an apportionment for staff that carry out tasks between patient & non-patient areas. Include the costs of provisions including food, beverages, special diets and ward provisions such as bread, milk, coffee. Include costs related to Assisted Daily Living or similar self catering arrangements. Include total gross labour costs for the inpatient food service, employers national insurance contributions, bonus & overtime payments for all staff employed, including food production, service staff, general assistants, generic workers, staff employed to regenerate food at ward level & agency costs incurred to deliver the catering service to inpatients. Include the costs for the distribution and collection of patient meals and direct ward issues/locally held supplies to patient areas. Exclude parental and enteral feeding, baby milk and nutritional supplements such as sip feeds.

Inpatient main meals requested: Total annual inpatient meals ordered from wards and departments. An inpatient meal is defined as either a breakfast, midday or evening meal order (or any substitute or alternative for any such meals) received from an inpatient (wards and departments) or the number of similar meals provided to wards and departments as an estimate of need where order systems are not in use. Where self catering arrangements are in place estimate the number of meals by reference to average bed occupancy rates.

Cost of feeding one inpatient per day (patient meal day): The average daily cost for the provision of all meals and beverages fed to one inpatient per day. The cost should include all pay and non-pay, including provisions, ward issues, disposables, equipment and its maintenance. Include provisions and equipment costs related to Assisted Daily Living or similar self catering arrangements. This is not the average cost for a single meal but for all meals and beverages delivered to the patients in one day.

Appendix F - Clinical and non-clinical areas

Clinical space - Areas directly related to the provision of clinical services and where patients and visitors have access, receive and recover from their treatment and are at risk.

Clinical departments and services:

- Acute Medicine including A&E, cardiology, respiratory medicine, endocrinology, gastroenterology, elderly medicine, rheumatology and dermatology services
- Addiction services including alcohol and drugs
- Adult Safeguarding
- Adult speech and language therapy
- Allergy including Immunotherapy and testing services
- Anaesthesia including pre- and post-operative care services
- Blood Tests
- Cancer Services
- Cardiology including Non-invasive diagnostic services including ECG, ETT and Echocardiography and Heart failure Services
- Chaplaincy
- Child and Adolescent Mental Health Services
- Clinical education including clinical teaching and seminar rooms
- Day Case Units
- Dermatology including Vulval Dermatology clinics and Hair Disorders clinics
- Diabetes & Endocrinology
- Ear, Nose and Throat (ENT);
- Elderly Medicine including Nursing home support services and Old age psychiatry Services
- Emergency Departments
- Endoscopy
- Fertility Services
- Forensic mental health services
- General Surgery including Gastroenterology, Endoscopy and Bowel Cancer Screening
- Genetics Service including dysmorphology clinics
- Genito Urinary Medicine (GUM) including HIV services
- Haematology including stem cell transplantation
- Health Visiting Services
- Hearing & Audiology
- Immunology
- Infectious Diseases & Tropical Medicine
- Laboratory Medicine
- Maternity Services including ante and post-natal services
- Maxillofacial & Oral Surgery including dental services
- Medical Illustration
- Medical research
- Mental Health services including Cognitive behavioural therapy, Psychiatry and Psychotherapy
- Neurology
- Nursing
- Nutrition & Dietetics
- Obstetrics & Gynaecology
- Occupational Therapy

· Oncology
· Ophthalmology including Retinopathy Screening and artificial eyes
· Orthodontics
· Orthopaedics & Rehabilitation including hydrotherapy, tai chi, aromatherapy, ultra-sound scanning, guided injection therapy services
· Outpatients
· Paediatrics
· Pain Services
· Pathology including laboratory medicines, blood banks, Phlebotomy (Blood Tests), cellular pathology, cytology, histology, mortuary services, microbiology, haematology and andrology
· Pharmacy including inpatient and outpatient services
· Podiatry
· Physiotherapy
· Plastic Surgery
· Radiology & Medical Physics including Bone Densitometry (DEXA), Computed Tomography (CT), Fluoroscopy, Magnetic resonance Imaging (MRI), Mammography, Nuclear Fluoroscopy, Magnetic resonance Imaging (MRI), Mammography, Nuclear Medicine Imaging, X-Ray (Plain Film) and Ultrasound services
· Renal Medicine including hospital and home haemodialysis and peritoneal dialysis services
· Research
· Respiratory Medicine including asthma and cystic fibrosis services
· Rheumatology
· Safeguarding
· Secure mental health services
· Sexual Health including Contraception, STI and HIV services
· Speech & Language Therapy including communication, swallowing and voice difficulties
· Sterile supply including decontamination and sterilization services
· Transplant services including tissue viability
· Trauma & Orthopaedics
· Urology
· Wheelchair services
· Women's and Children's Services
Other areas where patients and visitor have access, receive and recover from their treatment and are at risk:
· Hospital street and corridors;
· Toilets;
· Bathrooms;
· Main entrance including retail areas;
· Reception or waiting areas (both general and specific to departments);
· Stairways and lifts
· Restaurants (where open to patients and visitors and non-commercial);

Non-Clinical space– Areas where non-clinical or support services are provided and/or patients and visitors do not have access.

- Estates services and plant rooms related to Energy production and switching, Heating, Air Conditioning and Fire and safety systems
- Stairways and lifts
- Electro Biomedical Equipment maintenance
- Cleaning & infection control
- Workshops
- Laundry & Linen
- Kitchens
- Restaurants (not open to patients and visitors)
- Waste disposal
- Residential accommodation
- Day Nursery & Crèche Services
- Courier & Postal services
- Stores including medical records, sundries and surgical items
- Office space including areas used to provide administrative, interpretation services, finance, human resources, equality services, patient transport, security offices, parking management and portering services
- Other areas where patients and visitors do not have access

Commercial and retail space

- Areas where the trusts provides commercial services including laundry and linen, energy production they should be apportioned on the basis of the percentage of services provided e.g. a laundry provides linen services both for the trust and for commercial sale. The area should be split between “commercial and retail space” and “non-clinical space” based on the amount of linen
- Areas leased out for external retail where the trust receives income should be included here e.g. coffee shops. Where similar areas are leased out but income is not received, e.g. to charitable organisations, they should be assessed as clinical or non-clinical based on the services provided.
- Restaurants should be included here, if they are run on a commercial basis.

Appendix G - Waste Codes

The list below details the elements of the waste classifications in ERIC using the EWC codes. This list should not be considered as complete as there may be waste produced locally that is not specifically mentioned. In these cases, the overarching definitions used above should be applied. The analysis is based Health Technical Memorandum 07-01: Safe management of healthcare waste.

Clinical Waste - waste produced as a result of clinical activity, excluding Special waste

Medicines other than those that are cytotoxic and cytostatic/18 01 09, 18 02 08, 20 1 32

Medicines other than those that are cytotoxic and cytostatic/20 01 32

Non-medicinally-contaminated sharps/20 01 99

Other clinical infectious waste arising from healthcare activities/20 01 99

Special Waste - waste with hazardous properties which may render it harmful to human health or the environment

Non-infectious anatomical waste - chemicals present/18 01 02 and 18 01 06, 18 02 03 and 18 02 05

Cytotoxic and cytostatic medicines/18 01 08, 18 02 07, 20 01 31

Infectious anatomical waste - no chemicals present/18 01 03, 18 02 03

Cytotoxic and cytostatic sharps/18 01 03* and 18 01 08, 18 02 02 and 18 02 07

Infectious anatomical waste - chemicals present/18 01 03* and 18 01 06, 18 02 02 and 18 02 05

Other medicinally contaminated sharps/18 01 03* and 18 01 09, 18 02 02 and 18 02 08

Other clinical infectious waste - containing chemicals/18 01 03* and 18 01 06, 18 02 02 and 18 02 05

Non-medicinally-contaminated sharps/18 01 03*, 18 02 02

Infectious gypsum (plaster)/18 01 03*

Other clinical infectious waste arising - from healthcare activities/18 01 03*, 18 02 02

Infectious waste containing - dental amalgam/18 01 03* and 18 01 10

Healthcare chemicals without hazardous – properties/18 01 06, 18 02 05

Dental amalgam/18 01 10

X-ray fixer and developer/09 01 01, 09 01 02, 09 01 03, 09 01 04, 09 01 05

Cytotoxic and cytostatic medicines/20 01 31

Domestic waste - waste other than Special and Clinical Waste

Non-infectious anatomical waste, no chemicals present/18 01 02, 18 02 03

Sharps not contaminated with body fluids or medicines/18 01 01, 18 02 01

Non-infectious gypsum (plaster) wastes/18 01 04

Offensive/hygiene waste/18 01 04, 18 02 03

Mixed municipal waste/20 03 01

Healthcare chemicals without hazardous properties/18 01 07, 18 02 06

Please note that the definitions used are being reviewed and may be amended for the 2016-17 ERIC collection.