Patient-Led Assessments of the Care Environment (PLACE)
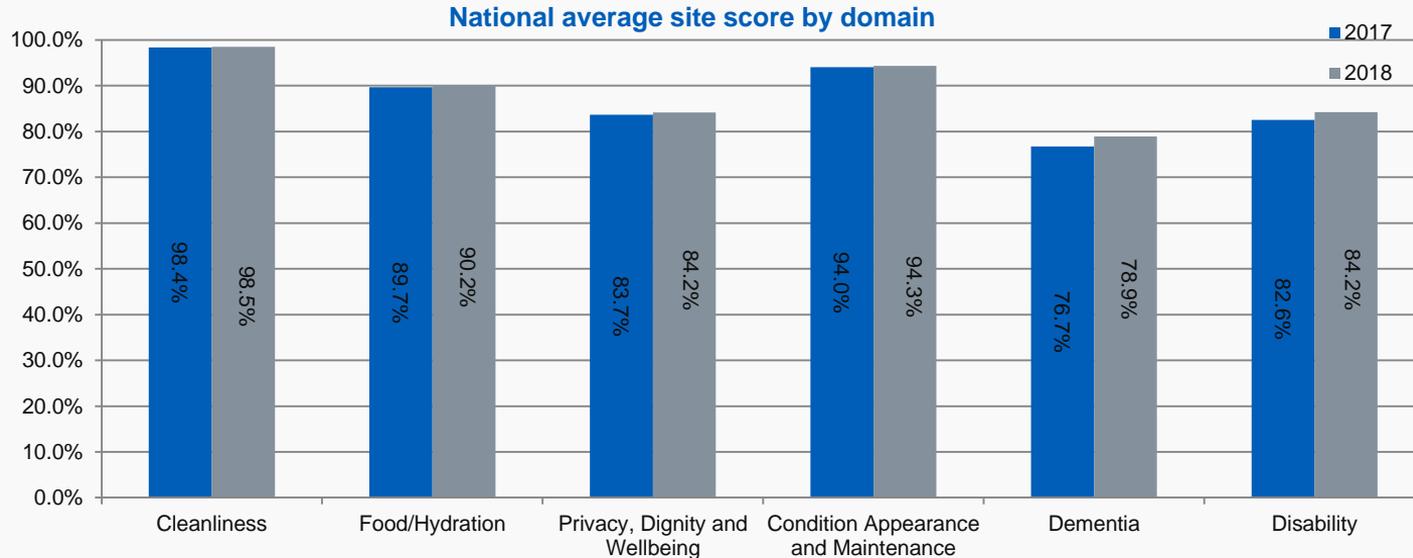
England 2018

PLACE 2018

- The Patient-Led Assessments of the Care Environment (PLACE) are an annual assessment of the non-clinical aspects of the patient environment, how it supports patients' privacy and dignity, and its suitability for patients with specific needs e.g. disability or dementia.

- The PLACE assessment tool provides a framework for assessing quality against common guidelines and standards. The environment is assessed using a number of question forms depending on the services provided by the facility. These can be viewed here: http://content.digital.nhs.uk/PLACE

- Questions score towards one or more non-clinical domains: Cleanliness; Food/Hydration; Privacy, Dignity and Wellbeing; Condition, Appearance and Maintenance; Dementia; and Disability.

- A total score as a percentage is produced for each domain at site and organisation level, as well as a national and a regional result.

Key Findings

-1,198 assessments were undertaken in 2018 compared to 1,230 in the previous reporting year.

-At national level, average[1] site PLACE scores have slightly improved since 2017 for all domains. The largest increases were seen for the dementia (up 2.2 percentage points[2]) and disability (up 1.6 percentage points) domains. These increases may reflect increased investment in and understanding of these newer PLACE domains (dementia was introduced in 2015 and disability in 2016).

-Overall, the highest national average domain score was for cleanliness, at 98.5%.

National average site score by domain

Domain	2017	2018
Cleanliness	98.4%	98.5%
Food/Hydration	89.7%	90.2%
Privacy, Dignity and Wellbeing	83.7%	84.2%
Condition Appearance and Maintenance	94.0%	94.3%
Dementia	76.7%	78.9%
Disability	82.6%	84.2%

[1] Averages are means and are weighted for bed numbers. See page 10 on Scoring for more detail.

[2] Note that differences between scores are rounded to 1 decimal place throughout this report. The values in the commentary should always be used when quoting differences between reporting years rather than calculating them from charts or tables.

Source: NHS Digital

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This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.

Data users

- We collect information on PLACE assessments so hospitals can assess the non-clinical aspects of their care environment against recognised standards and can publish local results along with action plans for improvement.

- Further information about our data users is available in the data quality statement that accompanies this publication. This can be downloaded here:

  http://www.digital.nhs.uk/pubs/place18

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Introduction

- The PLACE programme[3] was introduced in April 2013 to replace the Patient Environment Action Team (PEAT) assessments, which ran from 2000-2012.
- PLACE aims to promote the principles established by the NHS Constitution that focus on areas that matter to patients, families and carers:
    - Putting patients first;
    - Active feedback from the public, patients and staff;
    - Adhering to basics of quality care;
    - Ensuring services are provided in a clean and safe environment that is fit for purpose.
- PLACE encourages the involvement of patients, the public, and both national and local organisations that have an interest in healthcare in assessing providers.

[3]Further information on the PLACE programme can be found on the NHS Digital website here: **http://content.digital.nhs.uk/PLACE**

PLACE domains

- PLACE assesses a number of non-clinical aspects of the healthcare premises identified as important by patients and the public, known as domains:
    - Cleanliness
    - Food and hydration
    - Privacy, dignity and wellbeing
    - Condition, appearance and maintenance
    - Dementia: how well the needs of patients with dementia are met
    - Disability: how well the needs of patients with a disability are met

- The criteria for each represent good practice as identified by professional organisations whose members are responsible for the delivery of these services e.g. the Healthcare Estates Facilities Managers Association, the Association of Healthcare Cleaning Professionals and the Hospital Caterers Association. Dementia domain criteria draw heavily on the work of The Kings Fund and Stirling University.

Scope

- This report presents key information from the 2018 PLACE collection.

- All healthcare settings in England are eligible. Whilst the programme is voluntary, all sites are encouraged to participate provided they meet certain criteria as the assessments give patients and the public a voice in discussions about local service provision.

- A fundamental part of PLACE is the inclusion of lay assessors known generically as 'patient assessors'. All assessment teams must include a minimum of 2 patient assessors, making up at least 50% of the team.

- Further information about eligibility, patient assessors and the organisation of assessments can be found at the end of this report (page 39 onwards).

Scoring

- On the day(s) of assessment, the teams visit the various areas of the hospital and unit (e.g. wards, communal areas) filling out the relevant scorecards based on observed conditions[4].

- Results are sent to NHS Digital by hospital staff using the Estates and Facilities Management (EFM) online portal[5].

- Marks awarded for each question count towards one or more domains. Domain totals are then calculated on EFM and expressed as a percentage of the maximum marks available for each domain for each organisation and site.

- National averages are calculated using the following formula, to take into account the variation in hospital size (and that not all areas are assessed in larger sites):

$$\frac{\text{The sum of [Each site's score (points) multiplied by the number of beds in that site]}}{\text{The total number of beds in all assessed sites}}$$

[4] The full suite of assessment forms and associated guidance are published here: **http://content.digital.nhs.uk/PLACE**.
[5] Mobile devices for directly entering data onto EFM during the assessment are available, and are used by some organisations.

Timescales

- The timescale in which assessments are to be completed and data are to be submitted are co-ordinated by NHS Digital. Sites are provided with 6 weeks' notice and thereafter it is up to the organisation to arrange the date and details for the assessment(s).

- In 2018 the assessment period was between March and June, during which time staff from each organisation submitted data to NHS Digital via the Estates and Facilities Management (EFM) online system.

Results

- A total of 1,198 assessments were undertaken by 270 organisations. Of these, 218 (80.7%) were NHS Trusts, and 52 (19.3%) were voluntary, independent or private healthcare providers.

- In addition to the communal and external areas, assessment teams visited and assessed:
  - 4,387 wards
  - 2,068 outpatient departments
  - 353 emergency departments and minor injuries units

- All Trusts with eligible sites conducted PLACE assessments and submitted data.
- The precise number of non-NHS providers eligible to participate is unknown.

Sites completing 2018 PLACE by healthcare provider type
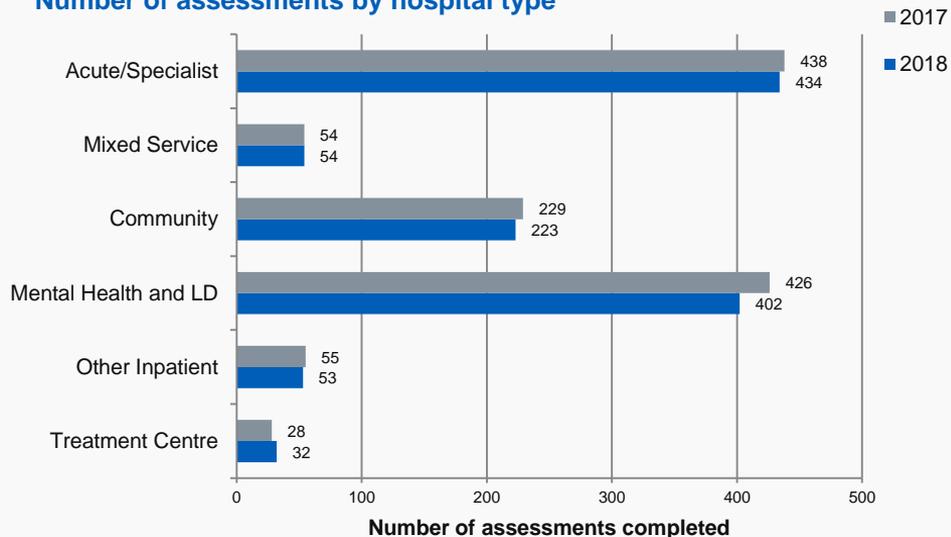

- NHS
- Other

19.3%

80.7%

12
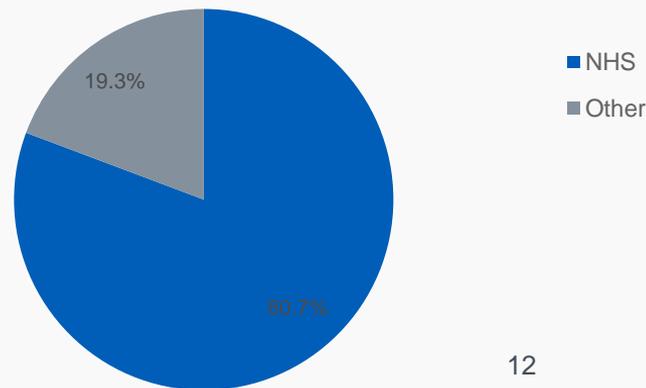
Site Types

The number of sites conducting assessments overall has dropped slightly between 2017 and 2018 for all types of site. Bed numbers can be used as a proxy for the size of the hospital and the table shows that the overall profile of sites by size completing PLACE assessments has changed little since the previous reporting year, with the majority of sites being small hospitals with 50 or fewer beds.

Number of assessments by hospital type

Hospital type	2017	2018
Acute/Specialist	438	434
Mixed Service	54	54
Community	229	223
Mental Health and LD	426	402
Other Inpatient	55	53
Treatment Centre	28	32

Number of assessments completed

Sites by grouped number of beds

No. beds (grouped)	2017		2018	
	no.	*%*	*no.*	*%*
Total	**1,230**	**100.0**	**1,197**	**100.0**
0-50	758	61.6	737	61.6
51-100	200	16.3	180	15.0
101-200	70	5.7	79	6.6
201-400	65	5.3	64	5.3
401-600	67	5.4	68	5.7
601-800	40	3.3	43	3.6
>800	30	2.4	27	2.3

Source: NHS Digital

Public involvement

6,388 patient assessors[6] took part in the 2018 programme, compared with 6,399 in 2017.

Rescheduling is always advised if the minimum patient assessor participating cannot be arranged. However, this is not always possible due to a number of reasons including availability and collection deadline.
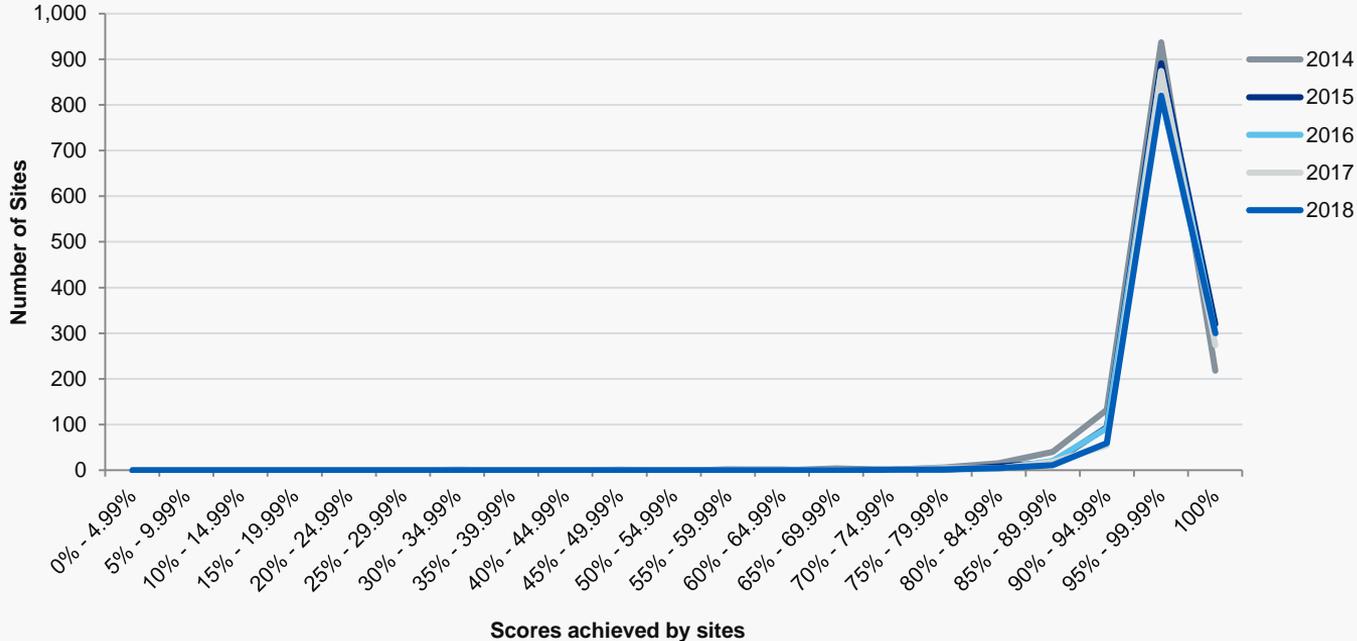
- The recommended minimum number of 2 was not met on 71 (4.5%) occasions (this figure was 5.3% last year).
- The minimum ratio of 50% patient assessors to staff assessors (50:50) was not met on 60 occasions (3.8%; this figure was 4.2% in 2017).

[6] Figures on this page relate to the number of patient assessor 'involvements' rather than individual people – some patient assessors may have undertaken more than one assessment or been involved in more than one day of a single assessment

Cleanliness Domain

- The national average score for cleanliness was 98.5% (the highest domain average), which is 0.1 percentage points higher than in 2017 and 1.2 higher than in 2014.
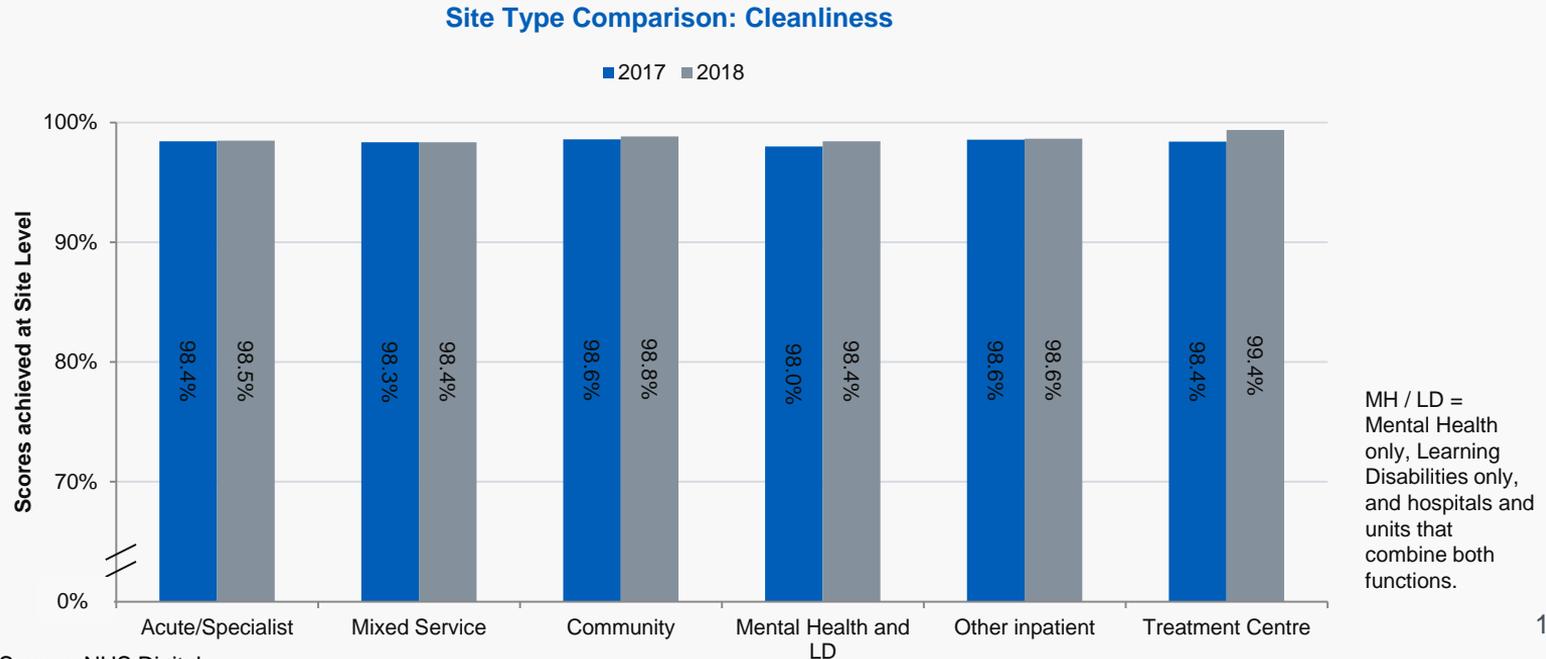- Site scores ranged from 74.8-100.0% (LQ 98.3; UQ 100.0%[7]), with a median score of 99.4%.

The Cleanliness Domain covers all items commonly found in the healthcare premises including **patient equipment.** Examples are **baths, toilets and showers, furniture, floors fixtures and fittings**.

Distribution of Cleanliness scores at site level

[7]LQ and UQ refer to the Lower and Upper Quartiles, between which the 'middle' 50% of scores lie.

Source: NHS Digital

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Cleanliness Domain by site type

- Average scores remained relatively stable between 2017-2018 for most site types, with observed differences being of less than 1 percentage point for all but Treatment Centres, where the increase in score was 1.0%.

Site Type Comparison: Cleanliness

■ 2017 ■ 2018

Site Type	2017	2018
Acute/Specialist	98.4%	98.5%
Mixed Service	98.3%	98.4%
Community	98.6%	98.8%
Mental Health and LD	98.0%	98.4%
Other inpatient	98.6%	98.6%
Treatment Centre	98.4%	99.4%

Scores achieved at Site Level

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

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Food and Hydration Domain

- 1,970 food assessments were undertaken in total at sites where meals are provided (1,136 sites). This excludes hospitals and units which are fully self-catering and those without inpatient beds. It also excludes sites where patients have very specific dietary requirements so the standard scorecard is not applicable (clinical exceptions).

- The food and hydration domain has an overall score based on both the organisational and ward assessment scorecards. Component scores are also calculated so that these aspects can be looked at in more detail.

- Different weighting algorithms apply to organisational food questions and the ward food taste question, depending on site type (acute, mental health, mixed) to reflect the relative importance of each question.

The food domain includes a range of organisational questions relating to the catering service e.g. **choice of food, 24-hour availability, meal times and access to menus**. It also includes an assessment of food at ward level including the taste, texture and appropriateness of serving temperature.
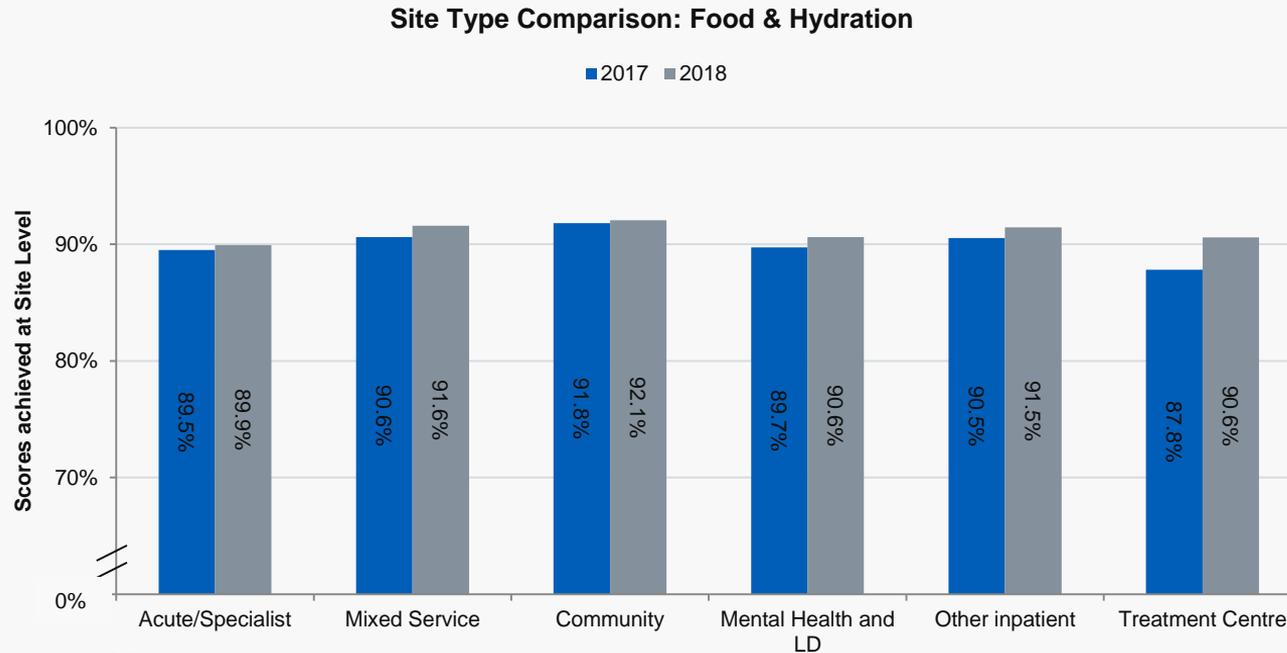
Food and hydration scores

- The national average score for the food domain overall was 90.2%, which is 0.5 percentage points higher than in 2017 and 2.5 points higher than in 2014, which was the first comparable reporting period.
- Site scores ranged from 60.7-100.0% (LQ 88.8; UQ 95.1%), with a median score of 92.1%.

Distribution of Food and Hydration scores at site level

Source: NHS Digital
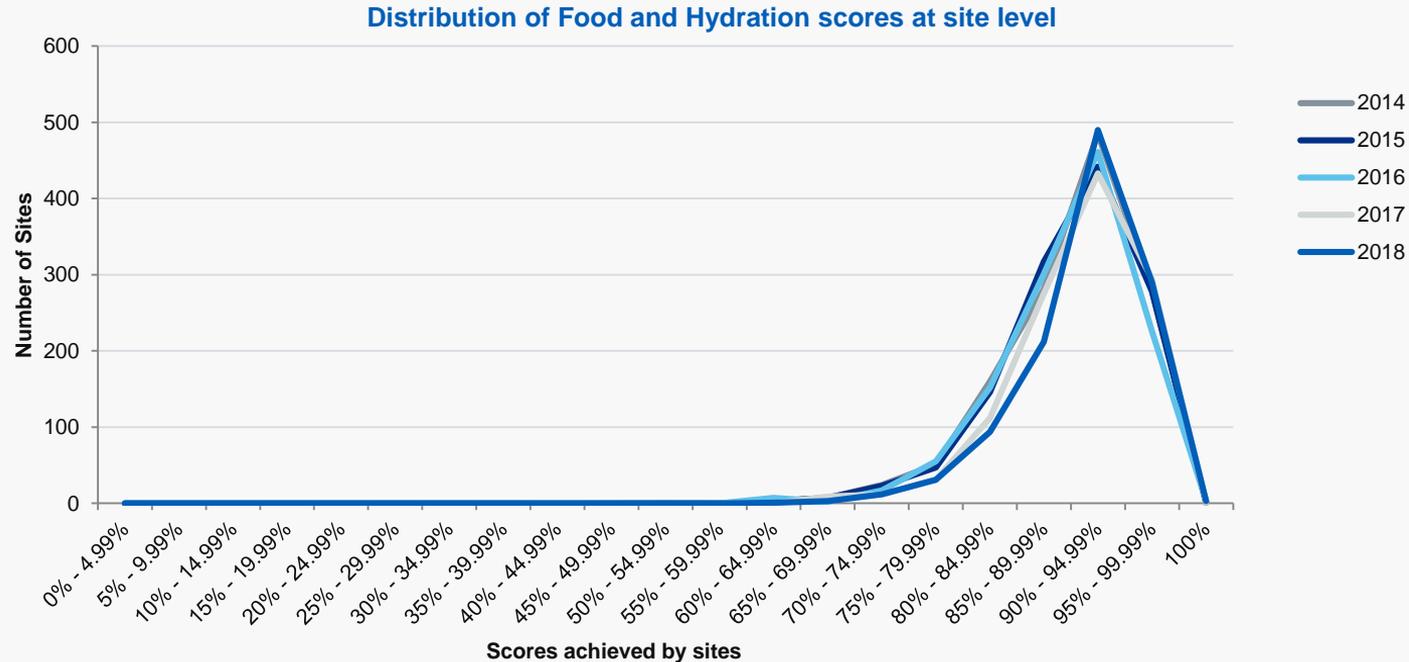
Food Domain by site type

- There were small improvements in most average food scores for all site types between 2017 and 2018.
- The largest improvement observed was for 'Treatment Centre' facilities, where the average score increased by 2.8 percentage points.
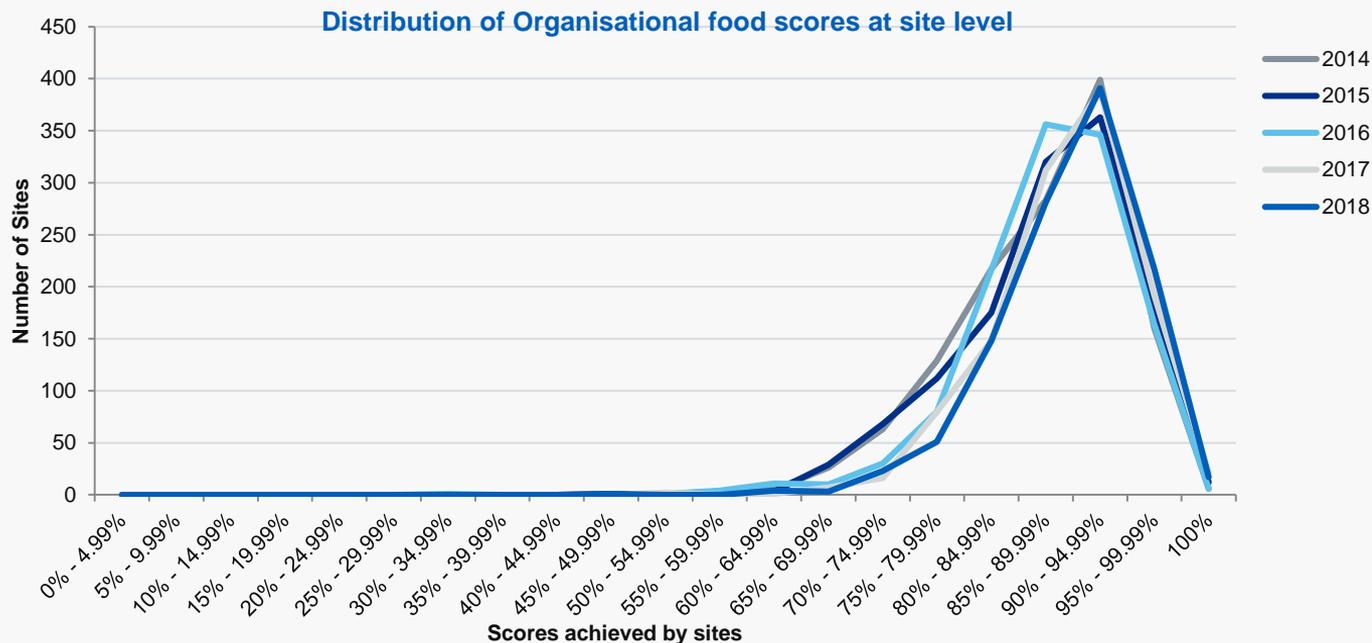
Site Type Comparison: Food & Hydration

■ 2017 ■ 2018

Site Type	2017	2018
Acute/Specialist	89.5%	89.9%
Mixed Service	90.6%	91.6%
Community	91.8%	92.1%
Mental Health and LD	89.7%	90.6%
Other inpatient	90.5%	91.5%
Treatment Centre	87.8%	90.6%

Scores achieved at Site Level

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

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Organisational food scores

- The national average score for organisation food was 90.0%, 1.2 percentage points higher than in 2017 and 3.9 higher than in 2014. Whilst results from 2014 are broadly comparable with later years, there were some differences in the scoring and comparisons should be treated with caution.

- Site scores ranged from 49.5-100.0% (LQ 86.4%; UQ 94.2%), with a median score of 90.9%.
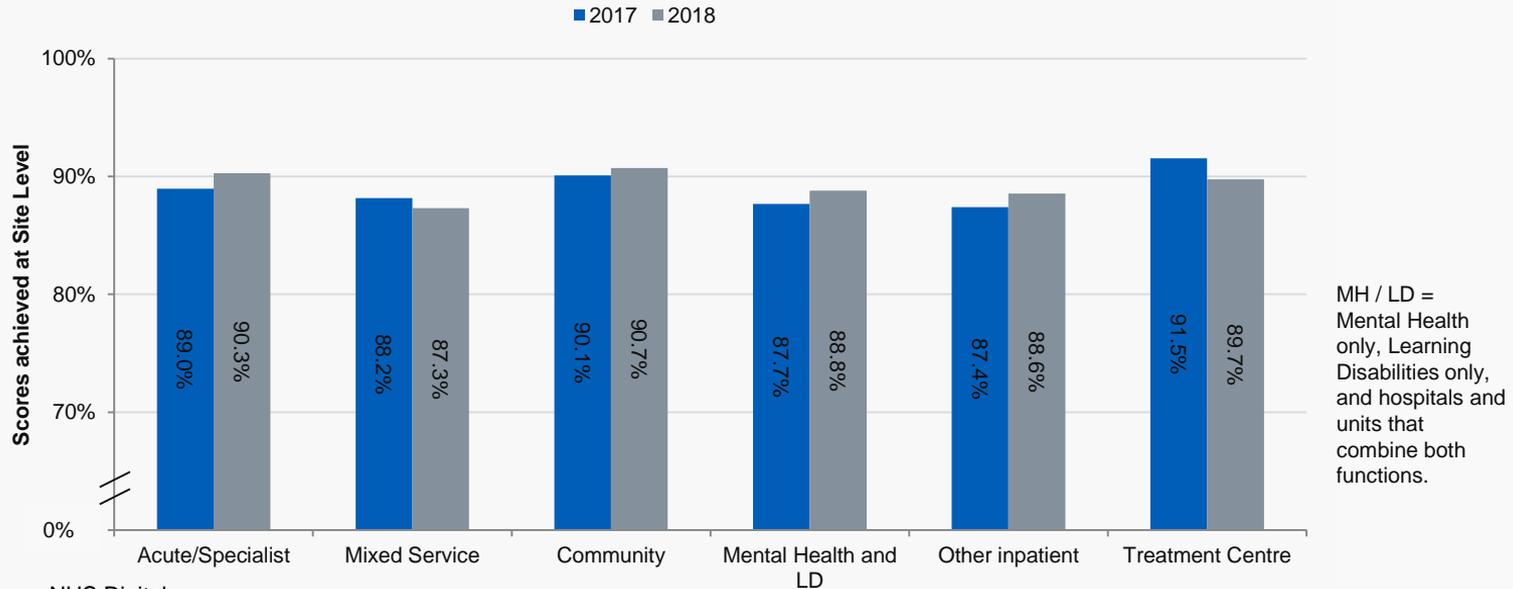
The organisation food scorecard domain includes a range of organisational questions relating to the catering service e.g. **choice of food, 24-hour availability, meal times and access to menus**.

Distribution of Organisational food scores at site level

Legend: 2014, 2015, 2016, 2017, 2018

Y-axis: Number of Sites (0 to 450)
X-axis: Scores achieved by sites (0% - 4.99% to 100%)

Source: NHS Digital

Organisational food scores by site type

- Acute/specialist, Other inpatient, Mental Health and learning disabilities and Community site types showed a small improvement in average organisational food score between 2017 and 2018. Mixed and Treatment Centre site types showed a small decline in this score (0.8 and 1.8 percentage points respectively).
- The largest improvement observed was for 'Acute/specialist' facilities, where the average score increased by 1.3 percentage points.

Site Type Comparison: Organisation Food

■ 2017 ■ 2018

Site Type	2017	2018
Acute/Specialist	89.0%	90.3%
Mixed Service	88.2%	87.3%
Community	90.1%	90.7%
Mental Health and LD	87.7%	88.8%
Other inpatient	87.4%	88.6%
Treatment Centre	91.5%	89.7%

Scores achieved at Site Level

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

Ward food scores

- The national average score for Ward food was 90.5%, which is 0.3 percentage points higher than in 2016 and 0.9 points higher than in 2015, which was the first comparable reporting period.

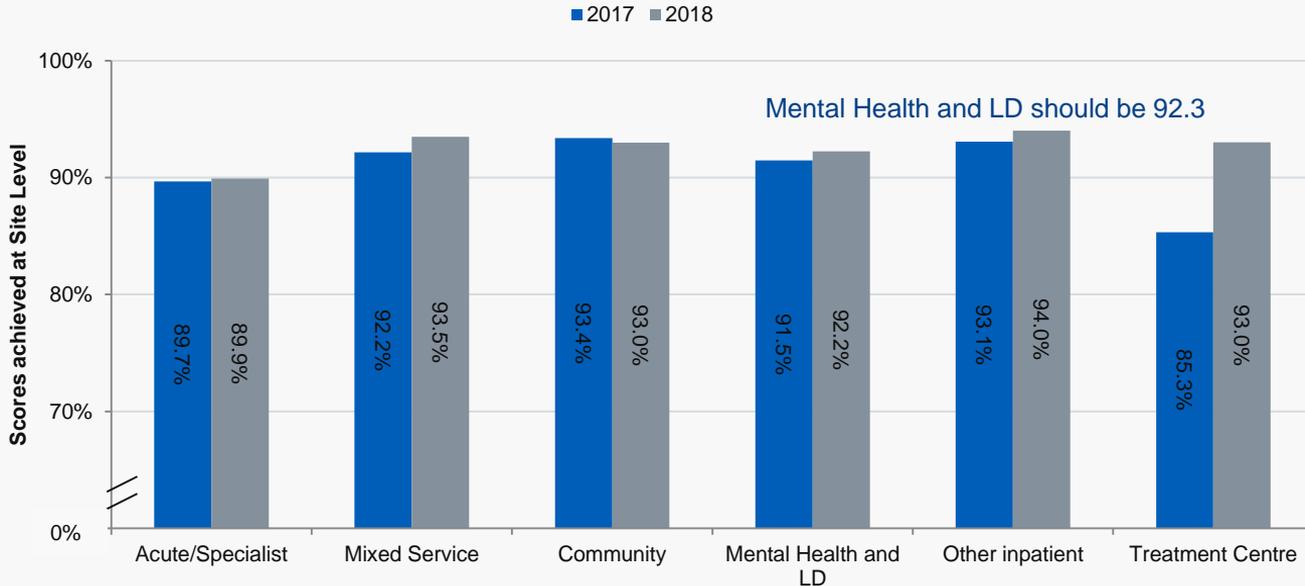- Site scores ranged from 48.1% to 100.0% (LQ 89.4; UQ 98.1%), with a median score of 94.5%.

The ward food scorecard includes an assessment of food at ward level including the taste, texture and appropriateness of serving temperature.

Distribution of Ward Food scores at site level

Source: NHS Digital
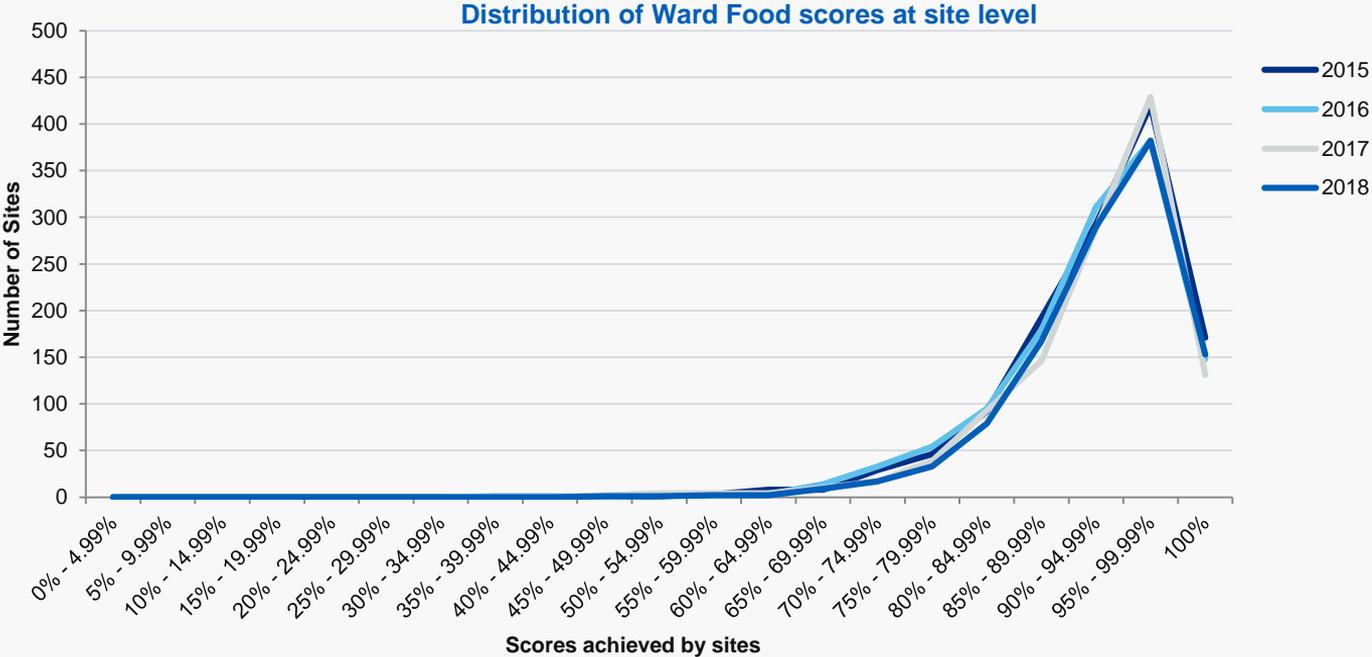
Ward food scores by site type

- Average national ward food scores[1] improved for all site types except Mixed between 2017 and 2018. The largest improvement was for Treatment Centre facilities, where there was a 7.7 percentage point increase.
- These scores decreased slightly for Mixed site types, where there was a decrease of less than 1 percentage point.

Site Type Comparison: Ward Food

■ 2017 ■ 2018

Mental Health and LD should be 92.3

Site Type	2017	2018
Acute/Specialist	89.7%	89.9%
Mixed Service	92.2%	93.5%
Community	93.4%	93.0%
Mental Health and LD	91.5%	92.2%
Other inpatient	93.1%	94.0%
Treatment Centre	85.3%	93.0%

Scores achieved at Site Level

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

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Privacy, Dignity and Wellbeing Domain

- The national average score for the privacy, dignity and wellbeing domain was 84.2%, which is 0.5 percentage points higher than in 2017 and shows the first year on year increase since these scores were first comparable in 2014.
- Site scores ranged from 53.9% to 100.0% (LQ 81.5 ; UQ 92.9%), with a median score of 87.7%.

**Distribution of Privacy, Dignity and Wellbeing scores at site level**
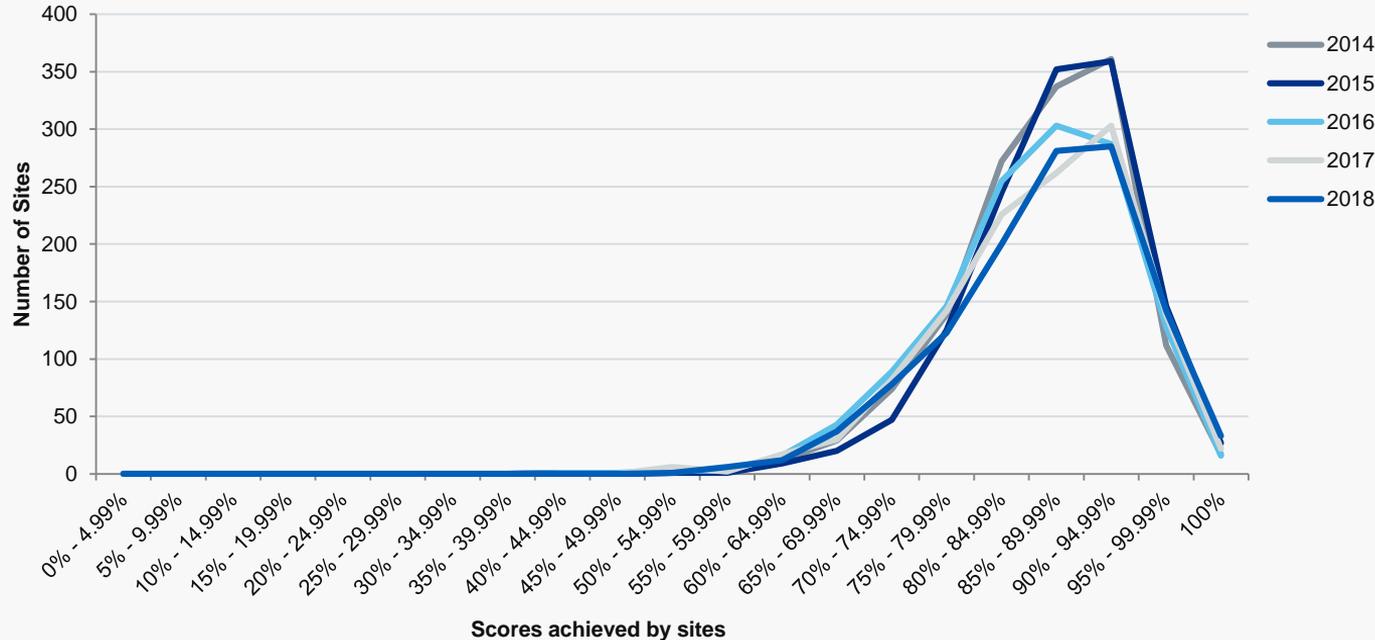
The Privacy, Dignity and Wellbeing domain includes infrastructural and organisational aspects such as the **provision of outdoor and recreational areas**, **changing and waiting facilities**, and **access to television, radio, internet and telephones**. It also includes the practicality of male and female services e.g. **sleeping, bathroom and toilet facilities**, bedside curtains sufficient in size to create a **private space around beds** and ensuring **patients are appropriately dressed** to protect their dignity.

Source: NHS Digital

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Privacy, Dignity & Wellbeing by site type

- Average national privacy, dignity and wellbeing scores decreased for Acute/Specialist, Mixed Service and Treatment Centre site types between 2017 and 2018. The largest decline in score was for Mixed Service facilities, where there was a 3.0 percentage point decrease.
- These scores increased slightly for Mental Health and Learning Disabilities, Other Inpatient and Treatment Centre site types.
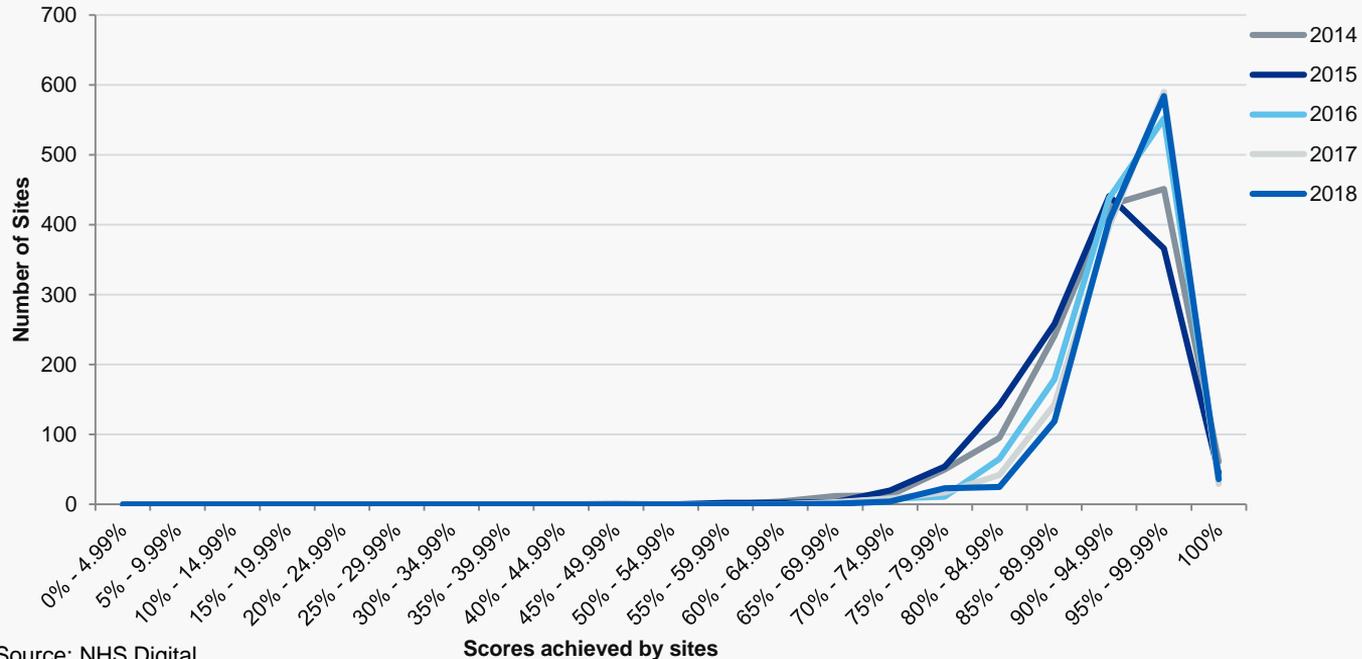
Site Type Comparison: Privacy, Dignity & Wellbeing
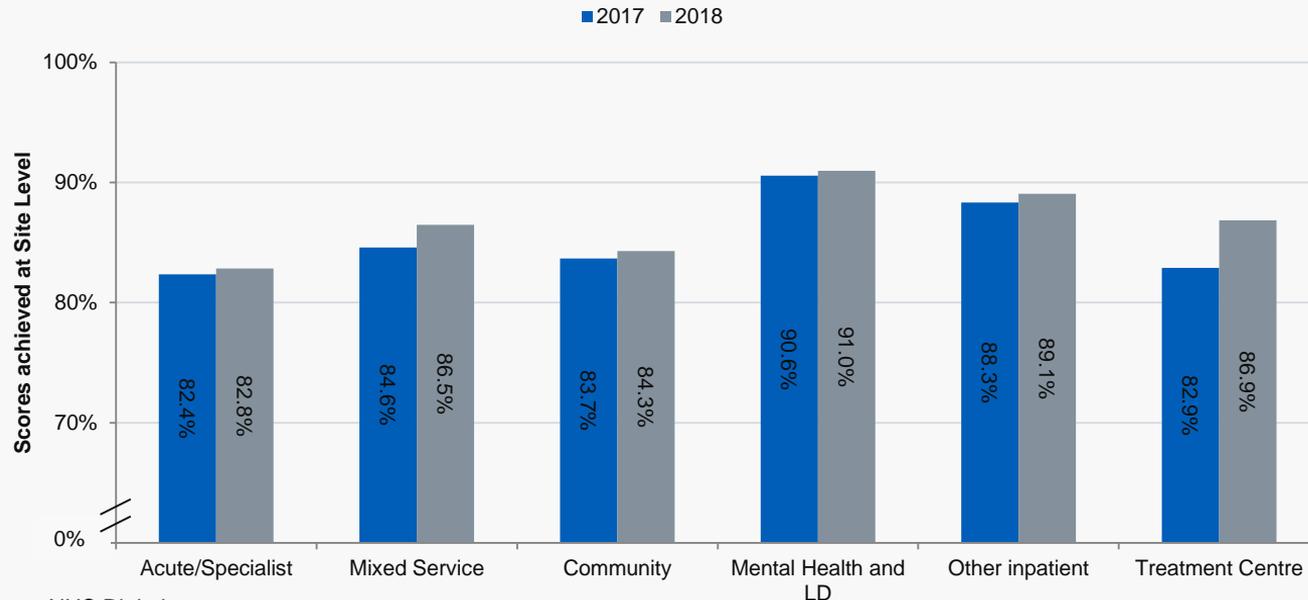
MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

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Condition, Appearance & Maintenance Domain

- The national average score for the condition, appearance and maintenance domain was 94.3%, which is 0.3 percentage points higher than in 2017 and 2.3 points higher than in 2014.
- Site scores ranged from 68.8% to 100.0% (LQ 92.0; UQ 97.7 %), with a median of 95.1%.
- Note that comparisons between 2014-2015 should be treated with caution as new questions

The Condition, Appearance and Maintenance domain includes various aspects of the general environment including **décor, condition of fixtures and fittings, tidiness, signage, lighting** (including access to natural light**), linen, access to car parking, waste management**, and the **external appearance of the buildings** and the **maintenance of the grounds**.


Distribution of Condition, Appearance and Maintenance scores at site level

Legend: 2014, 2015, 2016, 2017, 2018

Y-axis: Number of Sites (0 to 700)

X-axis: Scores achieved by sites (0% - 4.99% through 100%)

Source: NHS Digital

Condition, Appearance & Maintenance by site type

- Average national condition, appearance and maintenance scores increased slightly for all site types between 2017 and 2018. The largest improvement in score was for Other Inpatient facilities, where there was a 1.8 percentage point increase.
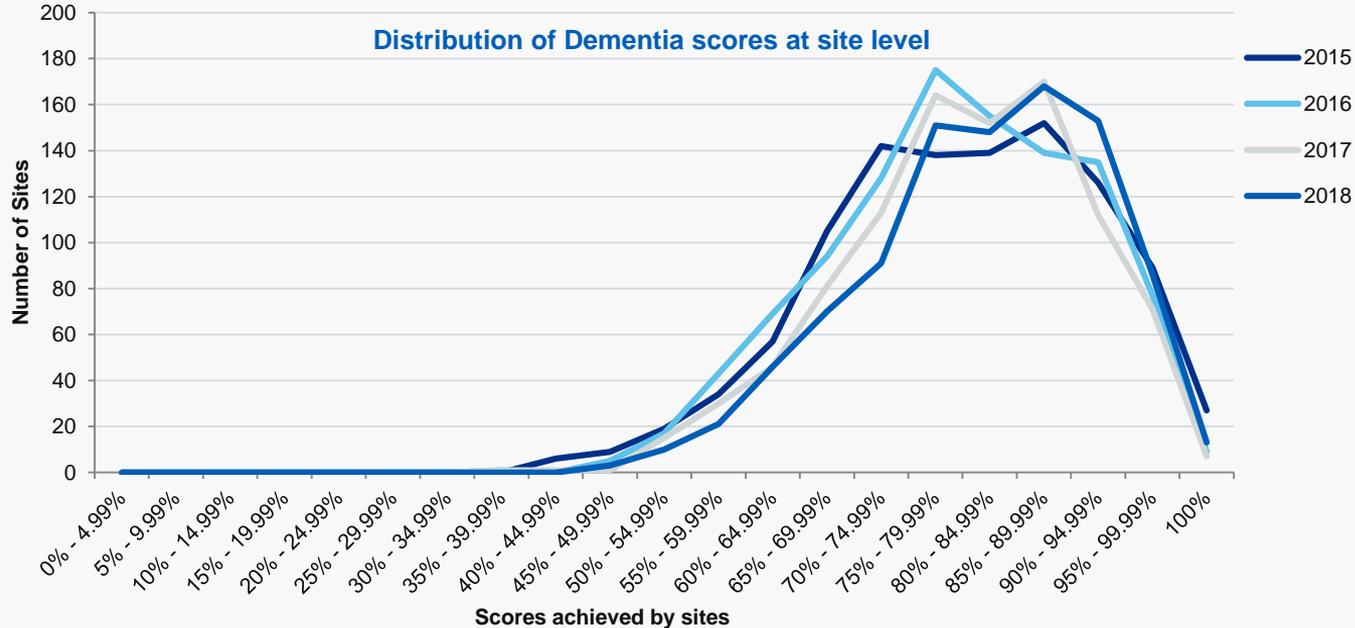
Site Type Comparison: Condition, Appearance & Maintenance
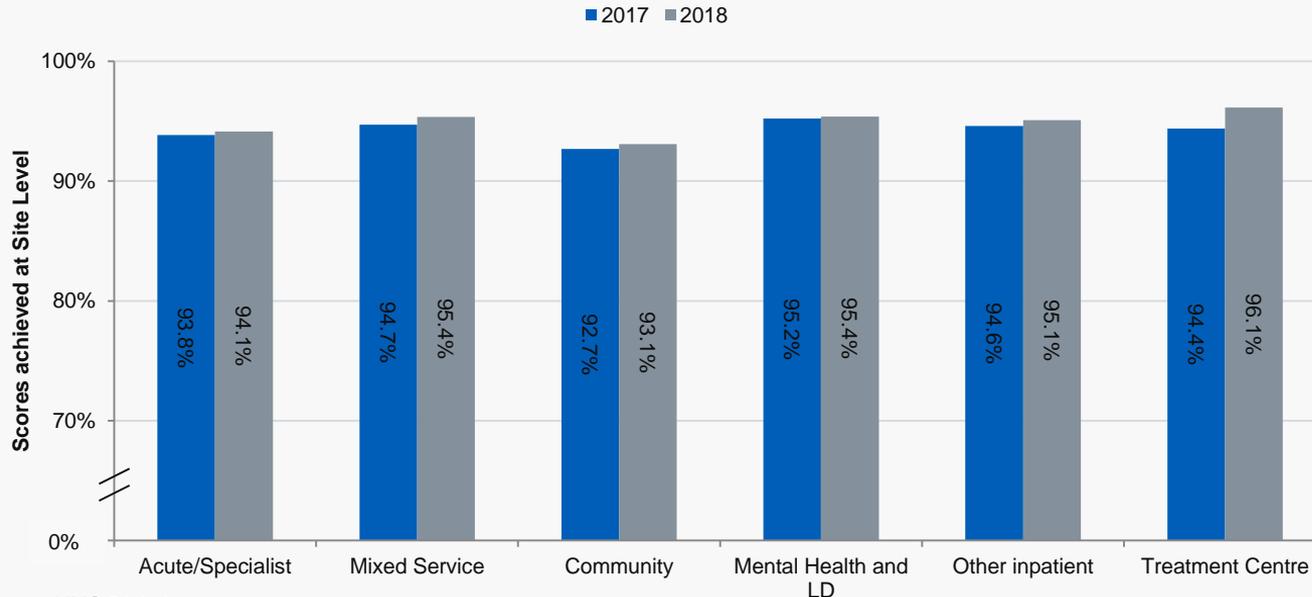
■ 2017 ■ 2018

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

Dementia Domain

- 956 sites were assessed against dementia criteria, with 242 declaring that, due to the nature of services provided, patients with dementia would not be admitted.
- The national average score for the dementia domain was 78.9%, 2.2 percentage points higher than in 2017, and 4.3 higher than in 2015, (first year for assessing dementia domain).
- Site scores ranged from 45.6% to 100.0% (LQ 74.9; UQ 90.4 %), with a median score of 82.7%.

Distribution of Dementia scores at site level

Number of Sites (y-axis: 0 to 200)
Scores achieved by sites (x-axis: 0% - 4.99% to 100%)
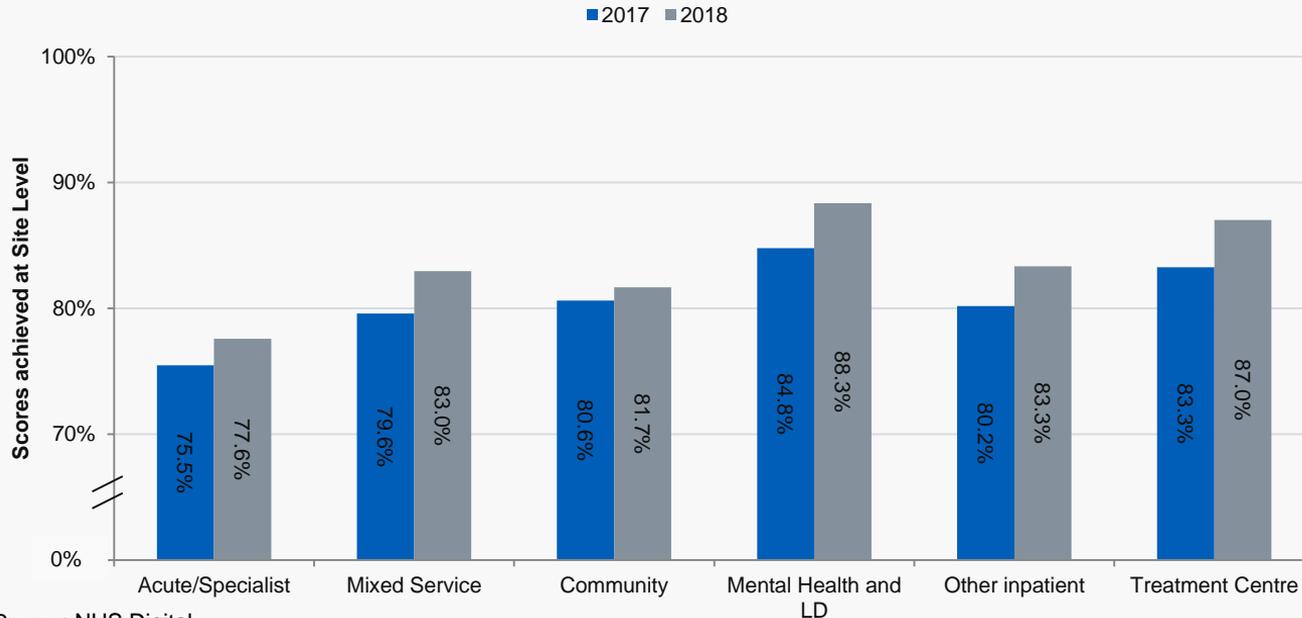
Legend: 2015, 2016, 2017, 2018

The Dementia domain focusses on **flooring, décor and signage** and also aspects such as **availability of handrails, appropriate seating** and, to a lesser extent, **food**. These represent key issues for providing for the needs of patients with dementia but do not constitute the full range of issues and organisations are encouraged to undertake more comprehensive assessments using one of the recognised environmental assessment tools.

Source: NHS Digital

Dementia by site type

- Average national dementia scores improved for all site types between 2017 and 2018. The largest improvement in score was for Treatment Centre facilities, where there was a 3.8 percentage point increase.


Site Type Comparison: Dementia

■ 2017   ■ 2018

Site Type	2017	2018
Acute/Specialist	75.5%	77.6%
Mixed Service	79.6%	83.0%
Community	80.6%	81.7%
Mental Health and LD	84.8%	88.3%
Other inpatient	80.2%	83.3%
Treatment Centre	83.3%	87.0%

Scores achieved at Site Level

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

Disability Domain

- The national average score for the disability domain was 84.2%, 1.6 percentage points higher than in 2017, and 5.3 points higher than 2016 (the first year that disability was assessed as a domain). This may reflect an increased awareness of the elements important in this domain.
- Site scores ranged from 50.2% to 100.0% (LQ 80.7; UQ 93.5%), with a median score of 87.6%.

Distribution of Disability scores at site level
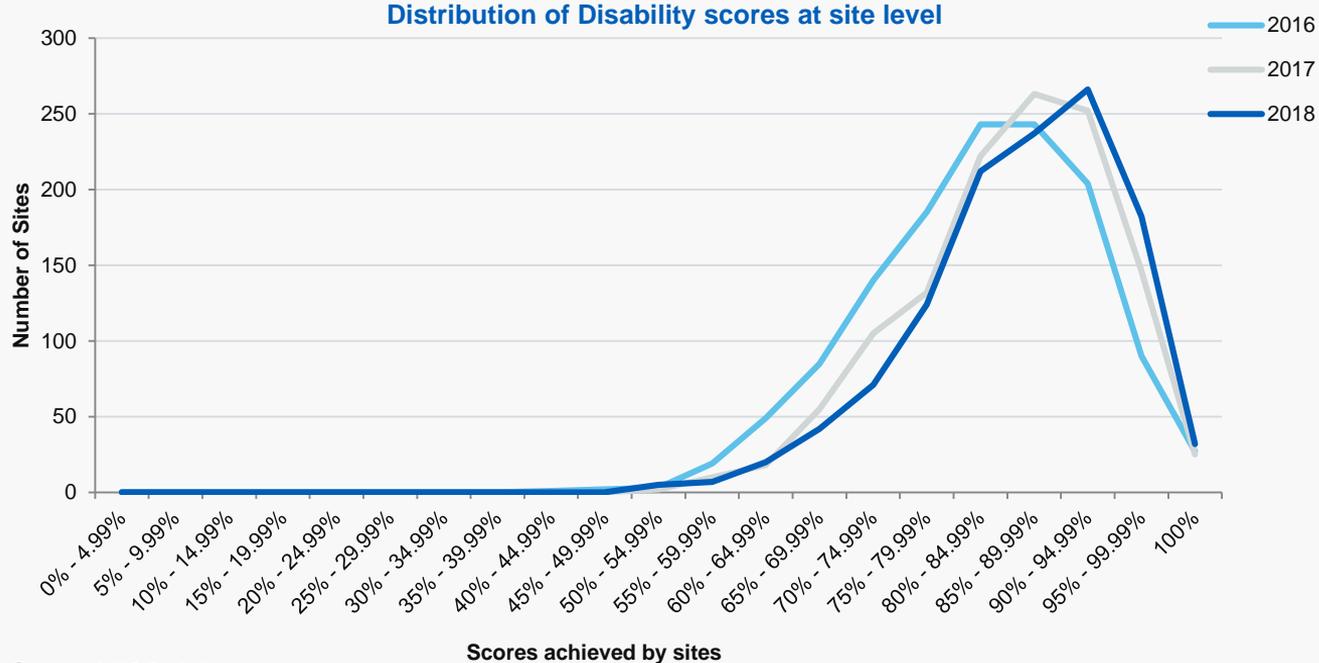
The Disability domain focusses on issues of access including **wheelchair, mobility (e.g. handrails), signage, hearing loops**, and aspects relating to **food** and **food service**. It shares many facets with the dementia assessment. Again the items do not include the full range of issues which need to be considered in order to meet the needs of patients with a disability, rather focussing on a limited range with strong buildings / environment related aspects covered by questions already in the PLACE assessment when this domain was introduced (2016).

Source: NHS Digital

Disability by site type

- Average national disability scores[1] improved for all site types between 2017 and 2018.
- The largest increase was for Mixed facilities, where the score increased by 2.6 percentage points.

Site Type Comparison: Disability

■ 2017 ■ 2018
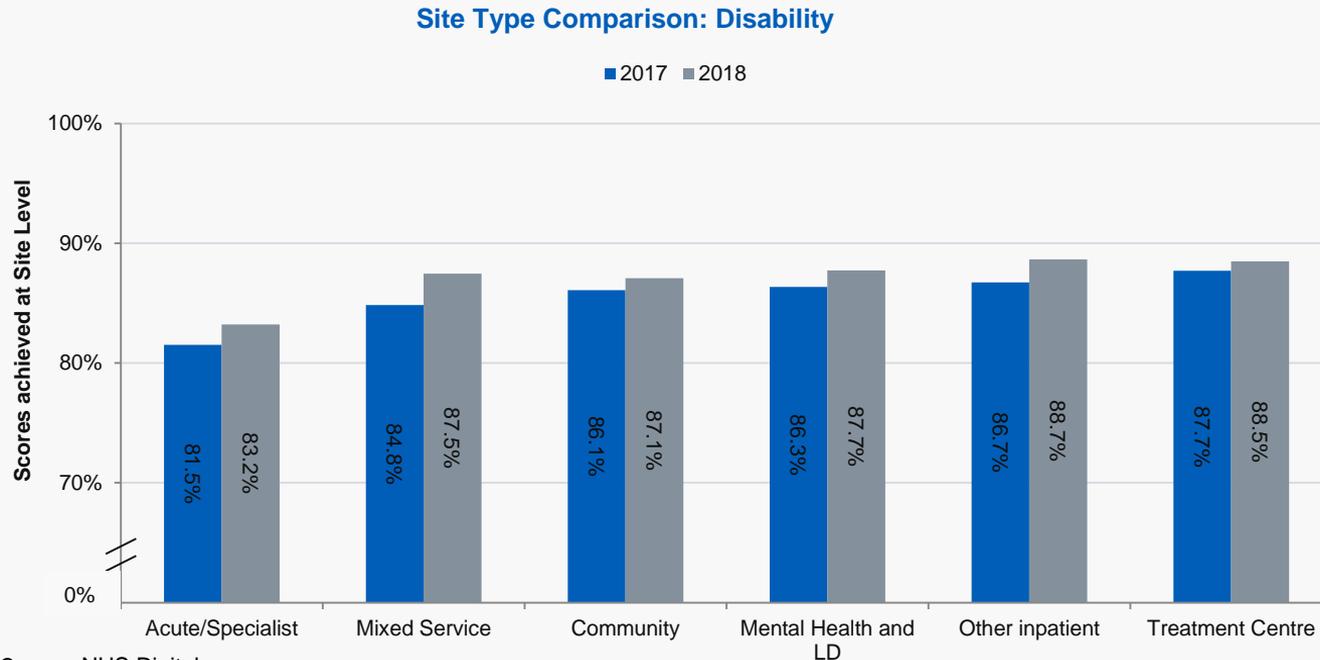
[1] Averages are means and are weighted for bed numbers. See slide 9 on Scoring for more detail.

MH / LD = Mental Health only, Learning Disabilities only, and hospitals and units that combine both functions.

Source: NHS Digital

Detailed Results

Regional and local information at organisation and site level can be viewed using our interactive data report, which includes maps. Users can select areas of interest and compare by organisation type, NHS/non-nhs and domain.

For consistency with the 2016 report, national averages by Commissioning Region are provided in tables in the Annex 1.

- Users can also download detailed data files which include assessment details and question responses.
- An assessment of the quality of 2018 PLACE data has been produced as a separate document.

- **This information is all available on the NHS Digital website here:**

  http://www.digital.nhs.uk/pubs/place18

Annex 1

Regional comparison of results

Average site score by region - 1

Regional comparison of Cleanliness scores 2017-18

	2017	2018
England	**98.4%**	**98.5%**
London Commissioning Region	98.2%	98.6%
Midlands and East of England Commissioning Region	98.2%	98.4%
North of England Commissioning Region	98.6%	98.6%
South of England Commissioning Region	98.4%	98.3%

Source: NHS Digital

Regional comparison of Food and Hydration scores 2017-18

	2017	2018
England	**89.7%**	**90.2%**
London Commissioning Region	90.0%	90.9%
Midlands and East of England Commissioning Region	89.6%	90.0%
North of England Commissioning Region	89.6%	90.1%
South of England Commissioning Region	89.7%	90.0%

Source: NHS Digital

Multiple comprises non-NHS organisations where sites are located across England. The collection system was altered for the 2017 collection so that each site could be allocated to a region of location.

Average site score by region - 2

Regional comparison of Organisational Food scores 2017-18

	2017	2018
England	**88.8%**	**90.0%**
London Commissioning Region	91.5%	92.0%
Midlands and East of England Commissioning Region	88.2%	89.3%
North of England Commissioning Region	88.3%	89.0%
South of England Commissioning Region	88.2%	90.6%

Source: NHS Digital

Regional comparison of Ward Food scores 2017-18

	2017	2018
England	**90.2%**	**90.5%**
London Commissioning Region	89.5%	90.7%
Midlands and East of England Commissioning Region	90.1%	90.5%
North of England Commissioning Region	90.4%	90.7%
South of England Commissioning Region	90.4%	90.2%

Source: NHS Digital

Average site score by region - 3

Regional comparison of Privacy, Dignity and Wellbeing scores 2017-18

	2017	2018
England	**83.7%**	**84.2%**
London Commissioning Region	82.3%	82.7%
Midlands and East of England Commissioning Region	83.5%	83.7%
North of England Commissioning Region	84.9%	85.5%
South of England Commissioning Region	83.3%	83.8%

Source: NHS Digital

Regional comparison of Condition, Appearance and Maintenance scores 2017-18

	2017	2018
England	**94.0%**	**94.3%**
London Commissioning Region	93.8%	94.5%
Midlands and East of England Commissioning Region	93.5%	94.0%
North of England Commissioning Region	94.9%	95.2%
South of England Commissioning Region	93.5%	93.4%

Source: NHS Digital

Average site score by region - 4

Regional comparison of Dementia scores 2017-18

	2017	2018
England	**76.7%**	**78.9%**
London Commissioning Region	76.9%	80.5%
Midlands and East of England Commissioning Region	75.6%	78.0%
North of England Commissioning Region	76.7%	79.0%
South of England Commissioning Region	77.9%	78.7%

Source: NHS Digital

Regional comparison of Disability scores 2017-18

	2017	2018
England	**82.6%**	**84.2%**
London Commissioning Region	79.7%	83.0%
Midlands and East of England Commissioning Region	82.9%	84.8%
North of England Commissioning Region	83.3%	85.0%
South of England Commissioning Region	83.2%	83.2%

Source: NHS Digital

Annex 2
Organisation of PLACE Assessments

Eligibility and organising assessments

- All healthcare settings in England are eligible, and sites which meet the following criteria should be included:
  - Sites with 10 or more inpatient beds
  - Sites with fewer than 10 beds where the services and the environment in which they are provided clearly are, or are analogous to, a hospital[8]

- Organisations are however free to include sites that don't meet the above criteria, and some choose to do this.

- Whilst the programme is voluntary, all such healthcare providers are encouraged to participate, as the assessments give patients and the public a voice in discussions about local service provision.

[8] A small eye hospital or birthing clinic would meet the inclusion criteria, whereas a small community based residential home with an assisted living care service (e.g. for individuals with learning disabilities or those recovering from drug addiction) would not.

The assessment team -1

- Anyone who uses the healthcare service can be a patient assessor including patient representatives e.g. family and visitors, patient advocates and patient council members. The only exceptions are existing members of staff, and former members of staff who have resigned in the previous 2 years.
- The team of assessors must include at least 50% patient assessors:
  - No fewer than two patient assessors must be in any assessment team (or sub-team where teams are split into more than one)
  - The ratio must never be less than 50/50. It can be increased in favour of patient assessors but not the other way.

The assessment team - 2

- The inclusion of an independent assessor is also recommended. These are individuals with experience of the PLACE process who observe and ensure that the assessments are conducted in accordance with the published guidelines and recommendations. They do not normally take part in the assessment and do not count as a patient assessor for the purposes of meeting the minima.

- Recruitment and training of patient assessors is the responsibility of each organisation, although they are encouraged to approach their local Health Watch (which provides assessors) as part of this process.

- Guidance on recruitment and training of assessors is provided here: http://content.digital.nhs.uk/PLACE

Conducting the assessment

- The precise scope of the assessment is tailored according to the site's size and service provision, subject to certain minima:
  - Sites should assess all of their wards up to 10, or 25% (whichever is greater)[8].
  - All emergency departments should be assessed.
  - A minimum of 25% of out-patient departments should be assessed.
  - A representative sample of 25% of 'common areas' (e.g. corridors) should be assessed.
- Communal and external areas should be assessed where they exist[9].
- The food assessment should be undertaken on 1-5 wards depending on the number of wards on the site as follows:
  - Up to 6 wards: 1 food assessment
  - 7-12 wards: 2 food assessments
  - 13-18 wards: 3 food assessments
  - 19-24 wards: 4 food assessments
  - 25 or more wards: 5 food assessments
- Food assessments are not undertaken where a site is fully self catering, has no inpatient beds, or has clinical exception patients (see page 17). Partly self catering sites only serve one main meal (lunch or dinner) and have an amended organisational food scorecard to reflect this.

[9] A site with 2 wards would assess both; a site with 10 wards would assess all; a site with 30 wards would assess 10; and a site with 60 wards would assess 15.
[10] Some healthcare services are provided in very small premises which do not have communal and/or external areas. This particularly applies in the Learning Disabilities sector, but may apply elsewhere.

Guidance materials

- Guidance on preparation for assessment is published here:
  http://content.digital.nhs.uk/PLACE
- These materials are reviewed following each publication and amendments are agreed and implemented in advance of the next collection.

Scoring approaches

- The full suite of assessment scorecards and associated guidance is published here:

    http://content.digital.nhs.uk/PLACE

- There are a range of scoring approaches which vary depending on the area and aspect being assessed e.g. Y/N; Pass/Qualified Pass/Fail; Answer list.

- Teams agree scores and completed scorecard results are submitted to NHS Digital via the EFM online collection tool. Mobile software for directly entering agreed scores onto EFM during the assessment is also available, and is used by some organisations.

- Some food scores (organisational and ward) are weighted; different weights are applied for Acute, Mental Health and Mixed hospitals / units.

Annex 3
Related Information

Related data sources

- Earlier PLACE reports (2013-2017) can be accessed via the [NHS Digital website](#).

- PEAT (the predecessor to PLACE) publications are also available on the NHS Digital website:

  - [PEAT results, 2001-2012](#)

  - The Estates team produces two other reports on NHS Estates, the latest of which are available at these links:

  - [Estates Return Information Collection (ERIC)](#)

  - [NHS Surplus Land](#)

Feedback

We would welcome all user feedback, particularly around the content and style of this report.

Please send feedback to efm-information@nhs.net quoting "Feedback on the PLACE Report" in the subject heading.

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