



Profile

Facility Demographic Information

1. What type of facility are you:

Long Term Acute Care Hospital (LTACH) ▾

2. Is the organization part of a health system?

☒ Yes

☐ No

2.a Please select which health system the facility belongs to:

Select an option... ▾

If the appropriate health system is not listed as an option, please select the **Other** option and write-in the health system name.

3. Number of LTC **Licensed Beds**

4. Number of LTC **Staffed Beds**

5. Number of **Patient Days** per year

6. Number of Outpatient Visits per Year

7. Please list the number of **Full Time Equivalent** (FTE) workers for your organization:

The Number of **Full Time Equivalent** (FTE) workers should be computed as the total number of hours worked by all workers in a week divided by the standard hours worked by one full time worker in a week. Workers may include employees of the property, sub-contractors who are onsite regularly, and volunteers who perform regular onsite tasks. Workers should not include visitors to the property such as clients, customers, or patients.

Reference: [EnergyStar Portfolio Manager](#)

8. How many FTE Physicians? Please include residents.

9. How many FTE Health Professions Students?

Health professions students including nursing students or other allied health professions students on rotations or on duty in the health care facility on average per year.

10. How many contracted full time employees (FTEs)? Please include employees in areas such as ES, Food & Pharmacy.

11. **Total Onsite FTEs:**

Total Onsite FTEs is the sum of FTEs, FTE physicians, FTE health professions students and contracted FTEs.

12. How does the organization **collect and track financial and environmental data**:

Other ▾

12.a Start date of fiscal year:**12.b** End date of fiscal year:**13.** Is there any **additional information** you would like to share to clarify the organization's operations/functions or what kind of institution you typically would **compare yourself against**?

Please provide the facility's physical address. This information is used to benchmark your data based on regional climate zones or other regional metrics. Nothing will be mailed to this address. This information is required.

14. Physical address (number and street name)**15.** City**16.** State

Select an option... ▾

17. Zip or Postal Code**18.** Country

Please note: This information will import each year so you don't have to re-enter your site address unless there are changes.

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