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CONFIDENTIAL

DESPATCHED: 28/06/19

2018 CENSUS OF HUMAN HEALTH AND SOCIAL WORK ACTIVITIES

Tax Identification Number

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Please correct any errors appearing in this label.

Dear Sir\Madam,

Enclosed is a copy of 2018 Census of Human Health and Social Work Activities questionnaire.

COVERAGE AND SCOPE: It covers all establishments engaged in Human Health and Social Work Activities classified under the 2010 Fiji Standard Industrial Classification (refer to notes on page 2). If an establishment's Human Health and Social Work Activities are combined with other types of business, please report only on the operations of the Human Health and Social Work Activities.

PURPOSE: The census provides an important means of assessing the contribution this sector makes to the economy of Fiji, and indicates the changing composition and structure of the industry. The results of the Census will be used by the Fiji Bureau of Statistics in the estimation of the National Income of Fiji and in the provision of other key indicators.

REFERENCE PERIOD: Reference period is the calendar year 2018. If your accounting year is different provide information approximating closest to the calendar year 2018. Limited liability companies are requested to submit a copy of their financial statements with the questionnaire.

COMPULSORY REQUIREMENT: The Census is conducted under the provisions of the Statistics Act 1961 (Cap 71). In accordance with Section 8 subsection 2 of this Act you are required to fill the questionnaire and return it to the undersigned on or before **31/07/19**. Failure to meet this deadline could result in legal action without further notice.

CONFIDENTIALITY OF INFORMATION: Information supplied will be used by the Department for the preparation of statistics. Any release of information will be in accordance with the Statistics Act and only authorised persons will have access to individual information.

CONTACT PERSON FOR HELP AND ADVICE: Ms. Taloline Keleinavutoka on email talolinek@statsfiji.gov.fj or telephone 331 5822 (ext.386 244) or direct line 323 0844.

Kemueli Naiqama [Mr]
Deputy Government Statistician

NOTE: Under the 2010 Fiji Standard Industrial Classification, Human Health and Social Work include the provision of health and social work activities. Activities include a wide range of activities, starting from health care provided by trained medical professionals in hospitals and other facilities over residential care activities that still involve a degree of health care activities to social work activities without any involvement of health care professionals.

ORGANISATIONAL STRUCTURE

1 A business can have more than one establishment involved in similar or different activities at different locations. State the location, the type of activity engaged in and the Gross Turnover of each establishment during the year.

FORM OF OWNERSHIP

- 5 (1) Fiji owned:
This is an establishment operating in Fiji in which 51% or more equity is held locally.
- (2) Branch of an overseas company:
This is an establishment operating in Fiji which is controlled by or supervised by an overseas head office and which is an integral part of the foreign parent organisation. Branch has no equity share capital.
- (3) Subsidiary of an overseas company:
A company is a subsidiary of another if that other company owns this subsidiary wholly or holds more than half the nominal value of the equity share capital of this subsidiary company.

EQUITY PARTICIPATION

6 Give the proportion of the share capital held by residents of Fiji. Equity share capital held by companies or individuals on behalf of residents of Fiji should also be included.

NATURE OF WORK

7 In cases where establishments are involved in more than one activity at a single location, please state the major activity involved in.

OPERATING STATUS

8 If you are no longer in business, a **STATUTORY DECLARATION** must be attached to the questionnaire with the words “**CLOSED BUSINESS**” written across the questionnaire and returned to the Fiji Bureau of Statistics. The Statutory Declaration must be signed by a Magistrate or a Barrister/Solicitor, Justice of Peace or a member of the Notary Public acting on your behalf. The Statutory Declaration must state the name of the business, nature of its activity and the date on which it ceased operation. If your business operated for part of the year 2018 please provide information for the duration your business operated.

QUESTIONNAIRE

All relevant questions must be answered with clear and correct figures. Estimates will be accepted where actual data are not available. Values, **excluding VAT**, are to be expressed in Fiji Dollars.

ORGANISATIONAL STRUCTURE

1	Does this business operate at more than one location?			
	Please tick the appropriate box: No Yes If yes, please give details below:			
	NAME OF ESTABLISHMENT\BRANCH (1)	PHYSICAL LOCATION OF BUSINESS (2)	MAIN TYPE OF BUSINESS OR ACTIVITY (3)	GROSS TURNOVER (4)
	Note: This return is required for the addressed establishment only. In case this is not possible, a combined return with similar main activities may be submitted. If the information can not be provided on this basis, please state the reasons:			
	Remark: Please comment here to assist in the interpretation of data supplied:			

ACCOUNTING PERIOD

2	Please state the accounting period: From \ \ 2018 To \ \ 2018			
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LEGAL STATUS OF ORGANISATION

3	Please tick appropriate box			
	001 Sole Trader	1	Partnership	2
	Private Limited Company	3	Public Limited Company	4
	Co-operative	5	Government Owned Trading Entity	6
	Statutory Board	7	Central Government	8
	Local Authority	9	Local Government	10
	Joint Venture and Consortia	11	Non-profit organization	12
	Trusts and Estates	13	Consulates and Foreign	14
	Branch of a Company Incorporated Overseas	15	Societies and Associations	16
	Other Business Type (specify)			17

INTERNATIONAL TRADE

4	Please tick appropriate box	Yes	No
	Does the establishment import or export any type of goods or services		
	If yes, please specify. _____		

FORM OF OWNERSHIP

5	Please tick appropriate box			
	002 Fiji owned	1	Branch of an overseas company	2
	Subsidiary of an overseas company	3	Others (specify)	4

EQUITY PARTICIPATION

6	Please indicate in the appropriate box equity capital held by Fiji Citizens.			
	(a) As at end of 2017 %		(b) As at end of 2018 %	

NATURE OF WORK

7	Please give a brief description of the main activity of the establishment\ s covered by this return:			
	003 FOR OFFICIAL USE ONLY			

OPERATING STATUS

8	Please state whether the establishment in question (tick appropriate box)			
	Operated during the whole of the accounting period specified	1		
	Operated during part of the accounting period specified (specify mths)	2		
	Had not commenced business during the accounting period specified	3		

A] REVENUE FROM SALES AND SERVICES

SALES: This should be the actual selling value net of any discount or rebates allowed to the buyer. Also include:

- (i) Value of goods traded in or bartered as part of the sale,
- (ii) Delivery charges and installation costs if borne by the seller, and
- (iii) Inter-branch transfers recorded at cost.

FEE: This will include payments received in respect of services provided to the households.

Exclude VAT charged on goods and services provided.

B] GOVERNMENT AID

CURRENT GRANTS: Current grants refer to transfers from Government to cover current costs providing services to households.

CAPITAL GRANTS: Capital grants are transfers from the Government to cover costs incurred development projects.

C] OVERSEAS AID

CURRENT GRANTS: Included here are current transfers from rest of the world either in cash or in kind.

CAPITAL GRANTS: Included here are various grants and gifts, either in cash or in kind, for development purposes.

D] LOCAL AID

CURRENT GRANTS: Included here are non-government transfers received from within the country either in cash or in kind.

CAPITAL GRANTS: Included here are non-government grants and gifts, either in cash or in kind from within the country, for development purposes.

9. TURNOVER							
A] REVENUE FROM SALES AND SERVICES (\$)							
TYPES OF INSTITUTIONS		SALES	FEE	SUBSCRIPTION	FUND RAISING	OTHERS	TOTAL
		1	2	3	4	5	6
Human Health Activities	004						
Hospital activities	010						
Medical practice services	016						
Dental practice services	022						
Optometry activities	028						
Other human health activities	034						
Residential Care Activities	040						
Residential nursing care facilities	046						
Residential care activities for mental retardation, mental health and substance abuse	052						
Residential care activities for the elderly and disabled	058						
Other residential care activities	064						
Other Social Work Activities Without Accommodation	070						
Other Social work activities without accommodation	076						
TOTAL SALES AND SERVICES [Column 6: codes 009 + 045 + 075]					082	\$	

B] GOVERNMENT AID					
TYPES OF INSTITUTIONS		CURRENT GRANTS			TOTAL CAPITAL GRANTS
		FOR WAGES AND SALARIES	FOR OTHER PURPOSES	TOTAL	
		1	2	3	
Human Health Activities	083				
Hospital activities	087				
Medical practice services	091				
Dental practice services	095				
Optometry activities	099				
Other human health activities	103				
Residential Care Activities	107				
Residential nursing care facilities	111				
Residential care activities for mental retardation, mental health and substance abuse	115				
Residential care activities for the elderly and disabled	119				
Other residential care activities	123				
Other Social Work Activities Without Accommodation	127				
Other Social work activities without accommodation	131				
TOTAL GOVERNMENT AID [Columns 3 and 4]			135	\$	\$

C] OVERSEAS AID							
TYPES OF INSTITUTIONS		CURRENT GRANTS					TOTAL CAPITAL GRANTS
		CASH	GOODS	VALUE OF WORK DONE WITHOUT PAY BY OVERSEAS PEOPLE	OTHER	TOTAL	
		1	2	3	4	5	
Human Health Activities	137						
Hospital activities	143						
Medical practice services	149						
Dental practice services	155						
Optometry activities	161						
Other human health activities	167						
Residential Care Activities	173						
Residential nursing care facilities	179						
Residential care activities for mental retardation, mental health and substance abuse	185						
Residential care activities for the elderly and disabled	191						
Other residential care activities	197						
Other Social Work Activities Without Accommodation	203						
Other Social work activities without accommodation	209						
TOTAL OVERSEAS AID [Columns 5 and 6]					215	\$	\$

D] LOCAL AID							
TYPES OF INSTITUTIONS		CURRENT GRANTS					TOTAL CAPITAL GRANTS
		CASH	GOODS	VALUE OF WORK DONE WITHOUT PAY BY LOCAL PEOPLE	OTHER	TOTAL	
		1	2	3	4	5	
Human Health Activities	217						
Hospital activities	223						
Medical practice services	229						
Dental practice services	235						
Optometry activities	241						
Other human health activities	247						
Residential Care Activities	253						
Residential nursing care facilities	259						
Residential care activities for mental retardation, mental health and substance abuse	265						
Residential care activities for the elderly and disabled	271						
Other residential care activities	277						
Other Social Work Activities Without Accommodation	283						
Other Social work activities without accommodation	289						
TOTAL LOCAL AID [Columns 5 and 6]					295	\$	\$

E	TOTAL TURNOVER OF YOUR ESTABLISHMENT [CODES 082 + 135 (3) + 215 (5) + 295 (5)]	297	\$
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OTHER INCOME

- 12 a] Include all claims arising from business insurance. Examples of business insurances are insurance against the risk of buildings, properties and stocks. Exclude life, education or any other personal insurance.
- b] Include all claims arising from casualty insurance. Examples of casualty insurance are insurance against the risk of accidents and illness to employees. Claims for life, education or any other form of personal insurance are to be excluded.

OTHER INCOME			VALUE (\$)
10	Income from sales of goods without transformation (refer question 24)	298	
11	Subsidies and grants received	299	
12	Insurance claims received: a) Business insurance claims received	300	
	b) Casualty insurance claims received	301	
13	Profit or loss received from any other business in which you have an interest	302	
14	Rent received from: a) building	303	
15	Income from: a) Rent received from land	304	
	b) Interest received	305	
	c) Dividends received	306	
	d) Royalty received	307	
16	Bad and doubtful debts recovered	308	
17	Exchange gain	309	
18	Gain on sale of fixed assets	310	
19	Receipts from industrial services rendered to others e.g. repairs & maintenance	311	
20	Others (specify).	312	
	Total other income (Codes 298 to 312)	313	
21	VAT charged on goods and services provided	314	
22	GRAND TOTAL OF ALL INCOME RECEIVED (Codes 297 + 313 + 314)	315	\$

PURCHASES OF MATERIALS DURING THE YEAR

- 23 State in detail the total value of all purchases of materials and supplies for use in the operation of the business
- 24 State in detail expenditure of all materials and related articles purchased for resale during the year

Exclude VAT paid on supplies of goods and services.

FUEL, ELECTRICITY AND WATER

- 25-28 Fuel purchased, other than fuel purchased for resale, including gasoline and other fuel for vehicle etc should be included.
- 29 This should include the cost of electricity purchased for lighting, air conditioning, refrigeration etc.

OTHER EXPENDITURE

- 31 Repairs and maintenance costs paid to other firms covers the total costs of current repair and maintenance service provided by such firms on repairs done on vehicles, building etc of the establishment. Current repair and maintenance carried out by an ancillary repair and maintenance unit which has been treated as an independent establishment should be included.
- 32 Cartage and haulage expense includes payment for the transportation of goods and materials within the country. It excludes cost of transport carried out by your own equipment and employees.
- 34 Contract and commission work done by other establishments on your materials covers payments made by the establishment for contract and commission work done on materials controlled by your establishment.
- 45 a] Include payment in respect of leased\rented land. If it is not possible to separate payments made for land from building, please include expenditure in Question 43.

PURCHASES OF MATERIALS DURING THE YEAR			VALUE (\$)
23	Expenditure of materials and related articles for use in the business	316	
24	Expenditure of all materials and related articles purchased for resale during the year (refer question 10)	317	
	Total (Codes 316 to 317)	318	

FUEL, ELECTRICITY AND WATER			VALUE (\$)
25	Petrol/Automotive diesel fuel	319	
26	Industrial diesel fuel/Heavy fuel oil	320	
27	Kerosene	321	
28	Liquid petroleum gas	322	
29	Electricity	323	
30	Water	324	
	Total (Codes 319 to 324)	325	

OTHER EXPENDITURE			VALUE (\$)
31	Repairs and maintenance paid for on: a) Vehicles	326	
	b) Buildings	327	
	c) Plant and Machinery	328	
32	Cartage and haulage expenses paid to other firms	329	
33	Travel expenses (e.g. management, personal etc.): a) Air	330	
	b) Water	331	
	c) Land	332	
34	Value of contract and commission work done	333	
35	Audit and accounting	334	
36	Legal Fee	335	
37	Advertising and promotion	336	
38	Bank charges	337	
39	Postage	338	
40	Telephone and telecommunication	339	
41	Office stationery and supplies	340	
42	Management and consultation fee	341	
43	Rent paid for: a) Building	342	
	b) Plant and machinery	343	
44	Insurance paid: a) Business insurance	344	
	b) Casualty insurance	345	
45	Expenditure on: a) Rent paid for land	346	
	b) Interest paid	347	
	c) Dividends paid	348	
	d) Royalty paid	349	
46	Bad and doubtful debts written off	350	
47	Business licenses, rates on property paid to central or local government etc	351	
48	Fiji National University [FNU] Levy	352	
49	Exchange losses	353	
50	Loss on sale of fixed assets	354	
51	Depreciation claimed (to agree with question 62 (7))	355	
52	All other costs and expenses	356	
	Total other expenditure [Codes 326 to 356 excluding 348]	357	

EMPLOYMENT AND COMPENSATION OF EMPLOYEES

- 53 Please note that the information in respect of employment is for the last pay week in June 2018 but the rest of the question requires data for the appropriate accounting year.

Gross wages and salaries includes overtime, sick and holiday pay, bonuses, payments under piece rate schemes, all allowances, severance and redundancy pay, sales commissions paid to own employees and directors fee etc.

Payment in kind is the cost to the employer for providing employees with housing, transport, clothing, food, drinks, fuels, etc free of charge or at a reduced rate.

Operatives includes all employees directly engaged in the activity of the establishment, e.g. those in fabrication, processing, assembling, shop messengers, warehouse men, packers and repair men etc. Casual workers should also be included here.

Others include administrators, technical and clerical personnel, e.g. salaried managers, clerks and typists etc.

Expatriates are non-Fiji citizens who stayed in Fiji to work.

Working proprietors include all individual proprietors and partners who are actively engaged in the work of the establishment. Silent or inactive partners should be excluded unless they participate actively in the work of the establishment.

Unpaid family workers include persons living in the household of any of the proprietors of the owning establishment and working in the establishment without regular pay for at least a third of the normal working hours of the establishment.

STOCKS

- 56 a) All trading stocks (stocks intended for resale) should be included. Stocks of capital goods intended for resale should also be included.
- b) This should include stocks of materials used by the business in its operations.

LOANS AND ADVANCES

- 57 Please provide information relating to any loan or advances taken during the period.

NET EARNINGS AND TAXES PAID

- 58 This is the net profit of your establishment\enterprise from the profit and loss account. The following method would enable you to check if all the information from the trading, profit and loss account has been entered onto the questionnaire:

	Income	[Code 315 + 385]	\$
less	Expenditure	[Code 376]	\$
equals	Profit (+)\Loss (-)	[Code 404]	\$

EMPLOYMENT AND COMPENSATION OF EMPLOYEES						
53			NUMBER EMPLOYED	GROSS WAGES AND SALARIES PAID	EMPLOYER'S CONTRIBUTION TO FNPFC ETC	PAYMENT IN KIND
			(1)	(2)	(3)	(4)
a)	Fiji citizens	358				
b)	Expatriates	362				
	Total	366				
c)	Working without pay					
	i) Working proprietors	370				
	ii) Unpaid family workers	371				
	Total [Code 366+370+371]	372				
d)	From the total number in employment given in code 372, please state:					
	Total Males	373		Total Females	374	

54	VAT paid on supplies of goods and services	375	
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55	GRAND TOTAL OF ALL EXPENDITURE INCURRED [Codes 318 + 325 + 357 + 367 + 368 + 369 + 375]	376	\$
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STOCKS					
56	Please give the value of stocks held by your establishment		VALUE OF STOCKS (\$)		
			OPENING (1)	CLOSING (2)	CHANGE (2)-(1)=(3)
a)	Stock of finished goods bought for sale	377			
b)	Materials, fuel, supplies and components	380			
	Total	383			

LOANS AND ADVANCES							
57		Opening Balances 01/01/18	Additions during the year	Principle Repayment during the year	Other Changes	Closing Balance 31/12/18	Total Interest Payable for the Year
		\$ [1]	\$ [2]	\$ [3]	\$ [4]	\$ [5=1+2-3+4]	\$ [6]
Locally	386						
Abroad	392						
Total	398						

NET EARNINGS AND TAXES PAID			Amount (\$)
58	Net profit/loss of your establishment/enterprise. If this does not agree with question 59, please give reasons	404	
59	Taxable income of your establishment/enterprise	405	
60	Amount, if any, of previous year losses that was deducted before arriving at the taxable income	406	
61	Amount of Fiji Income Tax paid/payable by your establishment/enterprise.	407	

FIXED CAPITAL ASSETS

62 (7) Please ensure that: The value given for depreciation should agree with the value given in question 51.

62 (5) Own Account Construction: This is the cost of new fixed assets and additions to the existing fixed assets made by establishments own labour for its own use. Cost should be equivalent to labour costs plus value of materials at cost.

62 (G) Valuables include:

- (a) Precious stones and metals (e.g. diamonds, non monetary gold, Platinum and silver);
- (b) Antiques and other art objects (e.g. painting and sculptures); and
- (c) Other valuables (e.g. jewellery and collector items)

ENVIRONMENT RELATED QUESTIONS

In view of the importance of climate change and disaster related events, the FBoS has embarked on compiling Environment Economic Account to be consistent and comparable with other countries. Therefore, the need to capture these statistics from all sectors within the economy, including all business entities. The information provided by the establishment would help us further improve these accounts which would be used in planning and policy formulation.

63 Please provide the relevant information on the source of water for the establishment.

64 Please provide the relevant information on the source of energy for the establishment.

65 Please provide the relevant information on the method of solid waste disposal of the establishment.

66 Please provide the relevant information on the method of liquid waste disposal of the establishment.

FIXED CAPITAL ASSETS										
62			VALUE (\$)							
			Opening Book Value	Purchase of new and second hand assets at cost		Land Development & Improvement	Own Account Capital Construction	Sales of Capital Assets	Depreciation	Closing Book Value
				locally	from abroad					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)			
a]	Land	408								
b]	Non-Residential Building	416								
	Residential Building	424								
c]	Plant and machinery	432								
d]	Furniture, fixtures	440								
	ICT equipments	448								
	Other office equipment	456								
e]	Transport vehicles and related equipment	464								
f]	Research & Development	472								
g]	Valuables (Antiques, Artistic Originals Precious Metals, etc)	480								
h]	Others (specify):	488								
	Total	496								

ENVIRONMENT RELATED QUESTIONS

63	Please tick the appropriate source of water for the establishments			
504	Metered Water		1	
	Rain Water		2	
	River / Creek		3	
	Bore Hole		4	
	Others (Please specify)		5	

64	Please tick the appropriate source of energy for the establishments If tick 2, please tick appropriate source below.			
505	Electricity [FEA]		1	
	Electricity [Own Generation]		2	
	(a) Solar			a
	(b) Hydro			b
	(c) Diesel / Thermal			c
	(d) Windmill			d

65	Please indicate the method of solid waste disposal of the establishments			
506	Collection by City / Town Council		1	
	Collection by Private Companies		2	
	Private Incineration		3	
	Private Dumpsite		4	
	Recycled		5	
	Others (Please specify)		6	

66	Please indicate the method of liquid waste disposal of the establishments		
	507	Connected to Sewerage Line	1
		Septic Tank	2
		Disposal in the sea / river	3
		Others (Please specify)	4

Person we should contact if any queries arise regarding this form:

Name: _____

Telephone: _____

Facsimile: _____

Email: _____

Signature: _____

Date: _____

Please indicate (√) or (x) in the boxes below:

1) The company hires a Chartered Accountant

2) The form has been filled by a Chartered Accountant

THANK YOU FOR COMPLETING THE QUESTIONNAIRE