SCOTTISH CAPITAL

INVESTMENT MANUAL (SCIM)

Strategic Assessment (2025)

Contents

[1. Introduction 1](#_Toc204000567)

[2. Stages of Progression 1](#_Toc204000568)

[2.1. ‘Development’ Phase 1](#_Toc204000569)

[2.2. ‘Submission’ Phase 2](#_Toc204000570)

[2.3. ‘Review’ Phase 2](#_Toc204000571)

[2.4. ‘Pending Commitment’ Phase 3](#_Toc204000572)

[3. Completing the Strategic Assessment Template 4](#_Toc204000573)

[Project Fundamentals 4](#_Toc204000574)

[3.1. Lead Contact 4](#_Toc204000575)

[3.2. Project Scope 4](#_Toc204000576)

[3.3. Core Drivers for Investment 4](#_Toc204000577)

[Strategic Connection 4](#_Toc204000578)

[3.4. Links to Policy, Strategy or Planning 4](#_Toc204000579)

[Service Intent 5](#_Toc204000580)

[3.5. Service Arrangements 5](#_Toc204000581)

[3.6. Impact of the Proposed Service Model 5](#_Toc204000582)

[3.7. Service Volumes and Throughput 6](#_Toc204000583)

[3.8. Describe the Current Patient Profile 6](#_Toc204000584)

[3.9. Quantitative Data for Waiting Times 6](#_Toc204000585)

[3.10. Other Quantitative Data 6](#_Toc204000586)

[3.11. Describing other Quantitative Data 7](#_Toc204000587)

[Infrastructure Intent 7](#_Toc204000588)

[3.12. Infrastructure Arrangements 7](#_Toc204000589)

[3.13. Infrastructure Issues and Impact 7](#_Toc204000590)

[3.14. Quantitative Data on Infrastructure Condition 7](#_Toc204000591)

[3.15. Infrastructure Investment Hierarchy 8](#_Toc204000592)

[Local Community Intent 8](#_Toc204000593)

[3.16. Socio-economic impact 8](#_Toc204000594)

[3.17. Place-based Approach 9](#_Toc204000595)

[3.18. Quantitative Data on Population Demographics 9](#_Toc204000596)

[Environmental Impact 9](#_Toc204000597)

[3.19. Types of Environmental Improvement 9](#_Toc204000598)

[Financial Context 10](#_Toc204000599)

[3.20. Estimate of Full Capital Budget 10](#_Toc204000600)

[3.21. Estimate of Revenue Cost Implications 10](#_Toc204000601)

[Other Essential Information 10](#_Toc204000602)

[4. Final Overarching Considerations 11](#_Toc204000603)

# Introduction

This addition to the Scottish Capital Investment Manual (SCIM) suite of guidance documents describes how to complete the revised Strategic Assessment launched in 2025, and supersedes the previous template and guidance issued in 2017. It serves as a framework and information gathering repository for capital investment proposals so that they can be reviewed for alignment and importance in support of the Scottish Government’s strategic planning intent. It also acts as a gateway towards decisions on funding prioritisation and commitment prior to further advancement of a project.

# Stages of Progression

There are four key phases that a Strategic Assessment will progress through, which are outlined in the following diagram and then subsequently described:

## ‘Development’ Phase

Key attributes of a Strategic Assessment are that it is prepared by an appropriate multidisciplinary group; it is demonstrably aligned with a key change outcome from either a local, regional or national strategic policy, strategy or plan (this includes any proposals that are primarily driven by resilience); and that it clearly demonstrates the importance of that investment proposal. The standard strategic assessment template should be used to complete the Strategic Assessment; this must be adhered to and contain a combination of qualitative statements and supporting quantitative data.

## ‘Submission’ Phase

A Strategic Assessment can be prepared for any proposed capital investment out with the BCP or the Board’s capital allocation; however, each NHS Board will be limited to having submitted up to 3 assessments for consideration – these are expected to represent each NHS Board’s three capital investment priorities. If a fourth project is subsequently regarded as a greater priority, then the Board should discuss this with the Chair of the Capital Investment Group (CIG) to confirm how to proceed. Proposals prepared as part of an agreed National or Sub-National programme will not count towards the three local submissions attributed to each NHS Board.

Initial submissions can be made at any time during 2026-27 but do not necessarily need to be submitted at the same time. Initial decisions on recommended priorities are not intended to be made until after 31 March 2027, and thereafter. NHS Boards are expected to have followed their own internal review, prioritisation, and governance arrangements before submission to the Scottish Government.

It is anticipated that Strategic Assessments will also be submitted to the Scottish Government Health and Social Care Capital Investment Group (CIG) via agreed national or sub-national service change collaborations, particularly those emanating from the Scottish Government’s Service Renewal programme. Their priority for investment will be considered alongside Boards’ three local priorities.

## ‘Review’ Phase

All submissions will be considered by the Scottish Government Health and Social Care Capital Investment Group (CIG) across a number of strategic investment criteria, which currently covers the following:

1. Alignment with NHS Scotland’s future strategic intent for infrastructure.
2. Benefits to service provision and/or delivery.
3. Benefits to local population health outcomes.
4. Improved infrastructure resilience.
5. Value to the public purse.
6. Other criterion agreed by CIG.

Opportunities for further improvement against these criteria will be considered and further work advised by CIG. In such instances, the Strategic Assessment will return to the ‘Development’ phase for re-submission. If the Capital Investment Group is satisfied with the Strategic Assessment then it will automatically proceed to the ‘Pending Commitment’ phase.

## ‘Pending Commitment’ Phase

Strategic Assessments that have successfully passed the ‘Review’ phase will form part of a long-list of projects to be considered for funding prioritisation and commitment prior to further advancement. Capital funding constraints will mean that not all projects immediately proceed towards the Outline Business Case planning stage. The investment programme will therefore be prioritised and only those projects with a confirmed commitment to further development will be asked to proceed. This request to proceed will be confirmed in writing by the Chair of the Capital Investment Group.

# Completing the Strategic Assessment Template

This section provides guidance on how best to complete the Strategic Assessment Template, as a mandatory part of the submission process.

Project Fundamentals

This section should be used to establish the proposals overall purpose, scope and strategic narrative. It will provide the essential context for understanding what the project seeks to achieve, the conditions that have prompted its development, and the framework within which it will be taken forward. It should be clear, concise, and capable of standing alone to give a high-level view of the proposal and its place within wider service or system planning.

## Lead Contact

The email address of at least one senior manager/director who is the contact for correspondence relating to the Strategic Assessment should be provided.

## Project Scope

A title of no more than 15 words should be used to encapsulate what the proposal is all about (scope).

## Core Drivers for Investment

This will confirm the relative importance of the core drivers for investment between ‘resilience’, ‘service-renewal’ and ‘additional capacity’. There will be further opportunities to align the proposal with its investment objectives.

Strategic Connection

## Links to Policy, Strategy or Planning

The focus here should be on describing the strategic planning context behind the proposal. For example, how does it fit with any local Property & Asset Management Strategy, the Scottish Government’s Service Renewal Framework, and / or the Scottish Government’s strategic intent for infrastructure change?

Proposals must, in particular, demonstrate alignment with Scotland’s Health and Social Care Service Renewal Framework 2025-2035 and Scotland’s Population Health Framework 2025-2035. The overarching intention will be to demonstrate the strategic relevance and importance of the proposal, and to demonstrate that it does not sit in isolation to other plans for change. The key aspects of alignment and connection shall be briefly described.

Service Intent

This is an opportunity to clarify which services are in scope and the impact that this proposal will have on them. This will be essential in ensuring that investment decisions align with local and national healthcare priorities. It should explain what services will be delivered, how arrangements will differ from existing provision, and why this is considered an improvement. Clear service definitions also facilitate better integration with broader regional and national health strategies, ensuring consistency across Scotland’s healthcare system.

## Service Arrangements

This section should concentrate on how services will be delivered rather than how the buildings or infrastructure will support them. A description of the proposed service model should be presented, i.e. what specific services will be provided, who will deliver them, how care will be accessed and how services will be distributed. It is also important to explain how this differs from current arrangements.

## Impact of the Proposed Service Model

Describe how the proposed service model intends to impact service performance and outcomes if implemented. This may only be a statement of intent at this stage, but it will become an important consideration when reflecting on investment priorities – it must therefore be a realistic and deliverable intention.

## Service Volumes and Throughput

Quantitative data in support of the case for investment will always add weight to the argument. Service volumes, throughput and performance should be considered for inclusion here – this should also compare historic data with the current position and the future change if the proposal was to be implemented. Proposals not related to a clinical service should be adapted accordingly while using the same underlying principles.

## Describe the Current Patient Profile

The Board should describe the current makeup of the service users to make clear who or what will be affected by proposed changes. This could include indicators such as age, gender, specific long-term conditions, and other relevant characteristics. Where the proposal is related to technical processes rather than patient facing services, the profile description should be adapted accordingly. Anticipated changes to this profile due to the project should also be identified.

## Quantitative Data for Waiting Times

Patients frequently experience waiting periods before appointments, diagnosis and treatment. Where relevant, provide information describing the type and scale of waiting associated with this service delivery. This could include the total size of the waiting list or backlog, the profile of the waiting list and the average wait time. Depending on the primary driver and scope of the project, this may be projected to remain the same or be improved.

## Other Quantitative Data

If there are additional relevant project metrics specific to the cohort of patients, service arrangements, productivity and the project's scope that are not addressed in the service arrangement questions above, include them here. The metrics table can be used to present any relevant data not covered in previous sections.

## Describing other Quantitative Data

This section allows for the description of up to two further important metrics, where relevant - these should focus on service delivery rather than infrastructure.

Infrastructure Intent

This section shall be used to emphasise the infrastructure elements of the proposal rather than the service delivery aspect.

Details may cover aspects such as configuration, age, condition, usability, flexibility, safety, appropriateness, access, or other physical features relevant to the project as they relate to clinical service provision.

## Infrastructure Arrangements

Describe current thinking about the proposed infrastructure arrangements (property, digital resources, and equipment), whilst also explaining how this differs from current arrangements. Concentrate on size, type, shape, function, flow, and configuration. Fully developed, built-environment options are not expected at this stage.

## Infrastructure Issues and Impact

Describe the nature of any current infrastructure issues and the effect they are having, or likely to have, on service continuity, service performance, general safety, patient dignity (where relevant), staff and user wellbeing, etc..

## Quantitative Data on Infrastructure Condition

Provide quantitative data on the current state of the existing infrastructure covering aspects of quality, usability, and utilisation. Where available, also include data on past service interruptions (number of service users affected, bed days lost, days out of commission, environmental data, etc.) to illustrate the extent of problem areas, particularly if a core driver for investment relates to infrastructure resilience.

## Infrastructure Investment Hierarchy

All future infrastructure investment proposals will need to demonstrate that they have considered a hierarchy of options before determining that a new building solution is the best way forward. This hierarchy of options is explained through the following three questions:

1. Can change be implemented through better utilisation of existing infrastructure?
2. Are there alternate solutions for change that do not rely upon the need for new property to be the main focus; such as more reliance upon digital, equipment or alternate locations for service provision?
3. Where a new building solution is still regarded as necessary then what can be done to minimise its environmental impact?

At Strategic Assessment stage no conclusions should have been made on this issue, hence this section should be used to demonstrate that those alternative options are being properly considered. Boards should therefore outline current thinking only around these options.

Local Community Intent

The Scottish Government aims to ensure that every investment benefits both patients and the wider local community. This section should therefore be used to outline how the project will enhance community well-being through economic benefits, improved public spaces, enhanced services etc. This should help identify investments that will create a lasting, positive impact for communities.

## Socio-economic impact

As an anchor institution, the NHS has a significant presence within local communities and a responsibility to support their wider wellbeing. Any proposal should consider this role and how the proposal can be used to deliver broader community benefits and strengthen local connections. Describe early thinking on how you believe this proposal will provide a positive impact on the community it will serve and/or the locality in which it sits, including how it might contribute to local regeneration, help to improve the surrounding environment and enhance quality of life in the locality.

## Place-based Approach

The proposal should outline any conversations already taken place, or opportunities to do so in the future, with other agencies about the potential for infrastructure collaboration if this proposal was to proceed. The focus of that collaboration being about taking a place-based approach to investment in that community.

## Quantitative Data on Population Demographics

This section should present quantitative data on the community the project serves and those likely to be affected by it. This should include a demographic profile of that community and projections of future change over the next 20 years. Forecasts and trends based on local council-level data may be utilised if more localised data is not readily available.

Environmental Impact

The Scottish Government is committed to developing a more sustainable and environmentally responsible healthcare infrastructure; hence, any proposal must demonstrate its commitment towards reducing the environmental impact of the investment by maximising the reuse of existing infrastructure wherever possible.

## Types of Environmental Improvement

This section shall explain how the proposed investment might impact both positively and negatively upon the environment and community it will serve. This should include any actions that are already being considered to improve upon those positive and negative impacts. It will also need to be mindful of the investment hierarchy options still under consideration, which situates a new build solution at the end of that hierarchy.

Financial Context

At the Strategic Assessment stage, it is helpful to understand the financial implications of a project to determine its potential impact on future budgetary requirements.

## Estimate of Full Capital Budget

An early indication is required of the proposal’s full capital budget required from Scottish Government. The minimum expectation is that an estimate is provided between the following ranges:

* £10-50m.
* £50-100m.
* £100-250m.
* £250-750m.
* Above £750m.

This should be a proportionate and reasoned estimate which accounts for the full cost of bringing the facility into use. Given the early development stage and the uncertainties involved, it is advisable to present a high-level, cautious estimate that fully captures the potential scale of investment.

## Estimate of Revenue Cost Implications

While it is recognised that detailed revenue costs may not yet be defined at this stage of planning, it is important to recognise the likelihood of a proposal having additional revenue implications. An initial indication is therefore expected of any additionality impact on workforce and facilities budgets, relative to current annual levels (excluding inflationary impact).

Other Essential Information

This section provides an opportunity to include additional information not addressed elsewhere, which the Board deems essential for understanding the significance of this proposal.

# Final Overarching Considerations

The Strategic Assessment process seeks to gain a better understanding of the relevance and importance of all proposed capital investment priorities; therefore, it is imperative that each Board is content that they have managed to do this within their submission. Proposals should focus on strategic need and potential impact, rather than scale or funding value. There is no preference or weighting given to larger or higher-cost projects, nor to any specific driver for a proposal. Smaller, well-targeted proposals that address specific priorities or present opportunities for early progress are equally important and should be considered alongside more complex or higher-value schemes.

The value of internal stakeholder discussions is recognised, and agreement should be gained with that group in relation to the information that is included within the Strategic Assessment. The ‘Review’ phase by the Capital Investment Group should then be regarded as a supportive feedback process to that group, aimed at improving the scope and strategic alignment of each proposal. There should be an expectation that some projects will require additional work prior to being accepted into the ‘Pending Commitment’ phase.

Expectations about future funding possibilities will need to be carefully and realistically managed, as any submissions will form part of a long-term investment strategy whereby only a limited number of proposals are likely to be taken forward for further development at any one time.

Finally, the Strategic Assessment is part of the Scottish Capital Investment Manual suite of documents, hence, Boards are expected to follow their normal governance processes before issuing to the Scottish Government.