

Major Capital Investment Programme – Project Inclusion Criteria

Appendix 3

Criteria		Comment/supporting Information	Yes	No	N/A
1. Strategic Fit					
a.	Meets the strategic commissioning needs of the Council in the medium to long term; and		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	is in accordance with the Whole Systems joint housing health and social care commissioning strategic approach		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Takes account of the key PAF and BV indicators; and	<i>(Specify which PAF criteria the proposal will contribute towards.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	the most recent Commission for Social Care Inspection report.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Contributes to the ability to offer a range of services to support people living in their own homes, carers support, and specialist support for specific groups.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Promotes <ul style="list-style-type: none"> • Independence and choice • Social Inclusion • Equity of access • Innovation 		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
g.	Has measures which continue to address a reduction in delayed transfers of care and emergency re-admissions.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. External Fit					
a.	Accords with Government policies on client groups and service developments.	<i>(Provide examples e.g. NSF target)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Is likely to comply with the relevant Government Criteria if external funding is required.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Is likely to demonstrate the need for investment and value for money to The Treasury and the relevant government.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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3. Capacity	
a. Is there lack of capacity within the existing capital asset programme to support the required services?	
b. Takes account of the <ul style="list-style-type: none"> • Location; • Suitability; and • availability of alternatives in the independent sector. 	

Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

4. Partnership Working	
a. Builds significantly on partnership and co-operation across the whole health/housing economy and/or corporate services.	
b. Promotes integrated care for service users.	

Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Responsiveness	
a. Reacts to the needs and aspirations of service users, carers and the existing and potential stakeholders in the variety of localities and economies.	
b. Did consultation inform the proposal?	<i>Please specify</i>

Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Best Value and Flexibility	
a. Secures facilities capable of achieving best value and of responding to the changing needs over the life of the project.	
b. Offers potential revenue efficiencies.	
c. Offers opportunity to innovate and assess new services (e.g. those with special characteristics which require a demonstration of effectiveness and marketability before being replicated or extended.)	
d. Will provide service stability. e.g. assists with Market Control	

Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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