

Capital Works: Planning Policy Guideline

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Capital Works: Planning Policy Guideline

1. Policy Statement

The purpose of the Capital Works: Planning Policy Guideline (Planning Policy Guideline) is to assist SA Health and relevant stakeholders in identifying and adhering to requirements associated with planning SA Health capital works.

The planning phase is the first of four phases that form SA Health’s capital works process, as shown in Figure 1 below:

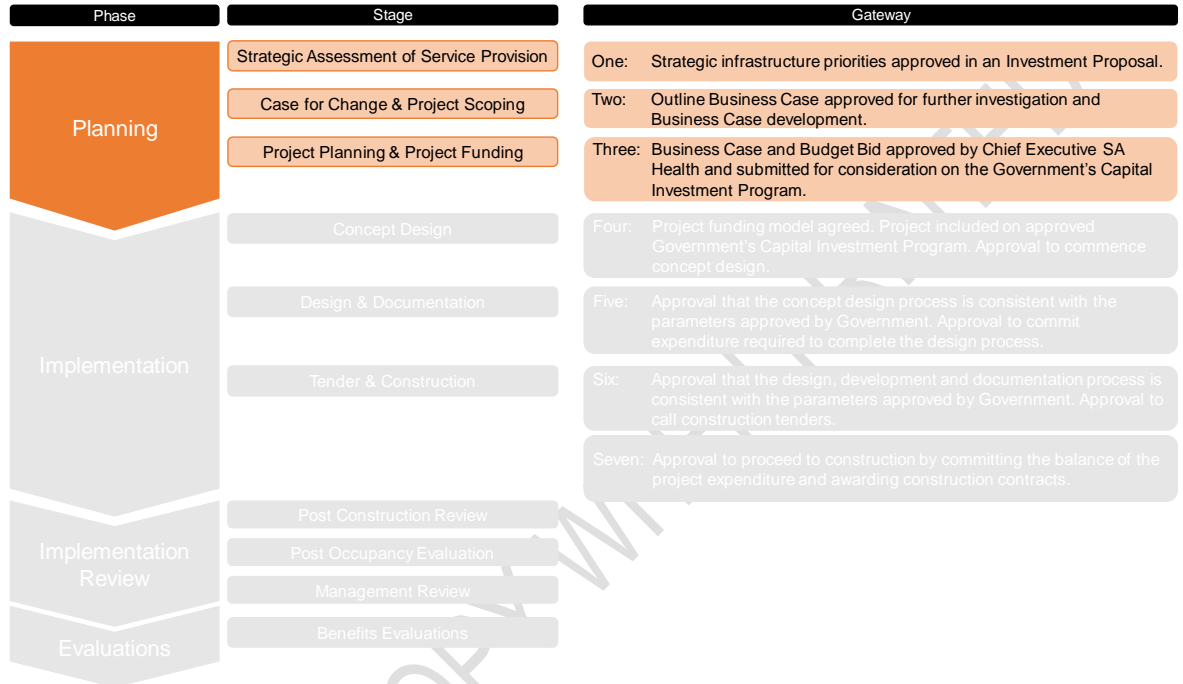


Figure 1: Capital works process Lifecycle

The procedures defined in section 3 (policy requirements) align with the steps outlined in the process maps in Appendix A, and the Gateway checklist provided in Appendix B. Each section defines a new stage, which is presented in a separate process map.

This Policy Guideline must be read and administered in conjunction with *SA Health’s Capital Works Policy Directive*.

Users of this Policy Guideline must also refer to Appendix C, which outlines the submission deadlines and minimum considerations required for each stage of the project planning phase, leading up to the development of a robust budget bid.

What is in this Policy Guideline

This Policy Guideline covers:

- Three sequential stages within the project planning phase, leading to:
 - The proposed project being developed into a Business Case and Budget Bid, to be approved by the Chief Executive SA Health.
 - Endorsed Business case and Budget Bid submitted for consideration as part of the Government’s Capital Investment Program.
- Process maps for each stage in the project planning phase.
- Key principles and activities undertaken in each stage.

- Tools and templates to support documentation requirements at each stage.

Scope

The Planning phase:

- Commences when a priority or need is identified (Investment proposal), where Department for Health and Wellbeing (DHW) is the lead agency responsible for delivering the service; and
- Concludes when the Business case and Budget bid is submitted by the Chief Executive SA Health.

The Planning Policy Guideline is to be applied to all proposed major capital works projects undertaken by SA Health. All major capital works projects are led by the Infrastructure DHW.

When to use the Planning Policy Guideline

This Planning Policy Guideline is to be utilised prior to the submission of any Investment proposal to the Chief Executive SA Health, and when undertaking any of the following:

1. Strategic assessment and service provision;
2. Case for change and project scoping; and
3. Project planning and funding.

2. Roles and Responsibilities

In the context of this document:

Chief Executive SA Health is responsible for:

- Strategic health system planning and primarily responsible for providing approval to proceed with planning for major capital works projects.

Chief Executive Officers (CEOs) of LHNs / BUs are responsible for:

- Identifying and documenting need for capital solutions within their scope.
- Managing compliance to the Capital Works Policy Directive in the development of capital solutions.
- Ensuring all submissions to Infrastructure DHW are made using the designated templates and meet prescribed deadlines.

Executive Director (ED) Infrastructure is responsible for:

- Overall project management and delivery including the initial planning, budgeting and approval elements of capital works projects.
- Managing the budget bid process.

This Policy Directive does not apply to:

- Information and Communication Technology (ICT) capital works projects, which are covered by ICT Governance Framework.
- Biomedical capital equipment annual program.
- Maintenance work, compliance works and minor works program, undertaken by DPTI or through the Across Government Facilities Management Arrangement (AGFMA).

3. Policy Requirements

Strategic Assessment of Service Provision (development of investment proposal)

Step 1.1: Pre-requisite SA Health service requirements and priorities are identified

The focus of any proposed public-sector investment initiative must link to priorities and needs as identified by Local Health Networks (LHNs) / Business Units (BUs), or DHW. Other Government agencies may also communicate external factors that could affect the planning process, such as whole-of-government priorities or needs of other agencies.

Irrespective of the source, the priorities and needs (also referred to as “triggers”) must be documented by the originator in an Investment proposal. The trigger must be clearly articulated in the Investment proposal as it forms part of the submission for the Business case and Budget bid.

Step 1.2: Service requirements assessed within context of LHN/BU strategic asset strategy

The LHN/BU should assess its current assets for suitability, capacity and condition to meet the specified and future service demand requirements.

Understanding potential gaps in the ability of the LHN/BU to meet service demand requirements will identify potential solutions; and this could include operational or service model changes, asset replacement or renewal, or new assets.

For triggers identified by DHW, at whole-of-government level, or by other agencies, Infrastructure DHW is responsible for analysing the triggers against strategic asset plans from a health system perspective, and document the need for a capital solution. This process must include the identification of drivers for the identified needs, and potential benefits or alternatives to be considered.

Step 1.3: Decision – Is an infrastructure solution required?

The need for an infrastructure solution could be assessed by:

- LHNs/BUs, after reviewing their strategic asset strategy; or
- Infrastructure DHW, after determining whether the current asset(s) meet service needs and future demands.

If an operational service solution is required instead of an infrastructure solution, this is to be addressed through a separate process.

If the LHNs/BUs determine that a capital solution is required, LHNs/BUs must document the need in an Investment proposal. The decision must be made jointly by Infrastructure DHW and LHNs/BUs.

Step 1.4: Decision – Is the infrastructure solution a major capital or a minor works solution?

If an infrastructure solution is required, the LHNs/BUs must consult with Infrastructure DHW as to whether the solution is a major capital solution or a minor works project:

- If the infrastructure solution is classified as minor works, the project is delivered through DPTI or Across Government Facilities Managements Arrangements (AGFMA), as part of a separate process; or

- If the infrastructure solution is classified as major capital works, proceed to step 1.5.

Step 1.5: Prepare Investment proposal

LHNs/BUs must document the need for a capital solution and the solution objectives in an Investment proposal (Appendix D), including:

- Case for change and future service requirements;
- Consider proposal against LHN's/BU's asset management strategy; and
- Assessment of the need for an infrastructure solution.

The solution objectives must include:

- Scope of capital solution required;
- Benefits derived from the capital solution (refer to *Capital Works Projects: Benefits Evaluation Policy Guideline* for more detail);
- Estimated expenditure of capital solution; and
- Required timeline for capital solution delivery.

The Investment proposal must be submitted to Infrastructure DHW in a timely manner and by the deadline prescribed, to ensure inclusion in a bilateral budget bid process. Infrastructure DHW will compile the Investment proposals and submit to the Chief Executive SA Health for consideration.

The Investment proposal would only proceed to the case for change and project scoping phase (development of Outline Business Case) when the Chief Executive SA Health (or delegate) approves the Investment proposal.

Step 1.6: Endorsement and approval of the Investment proposal

All Investment proposals must be endorsed by:

- Chief Executive Officer LHN/BU; and subsequently
- Chief Executive SA Health.

All Investment proposals must be approved prior to proceeding to the next step. This will ensure the capital priorities are flagged for Outline Business Case development.

Gateway One – Strategic infrastructure priorities approved in an Investment proposal.

Deliverables	Investment proposal
Approval Delegate	Chief Executive SA Health

Case for Change and Project Scoping (development of Outline Business Case)

Step 2.1: Stage pre-requisite

To commence the Case for Change and Project Scoping Stage, approval from the Chief Executive SA Health must be obtained for the Investment proposal. This approval triggers the commencement of the Outline Business Case.

Step 2.2: Consultation to validate capital project scoping

LHNs/BUs must consult with Infrastructure DHW to undertake an analysis of current service provision requirements and to validate the capital project scope. This analysis also includes validation and reassessment of the Investment proposal based on the most up-to-date information on hand, and action any adjustments to the project scope and parameters as appropriate.

Step 2.3: Project scoping and definition

In developing an Outline Business Case, the following activities must be considered:

- Undertake strategic project planning – through this process a range of potential options to meet the Government’s and the LHN’s/BU’s objectives for service delivery should be identified;
- Undertake high-level project scoping of infrastructure options addressing the capital project scope – Infrastructure DHW will scope the proposed project, and in collaboration with the LHN/BU identify options to address scope. At a minimum project scoping, options development and project definition should include:
 - required services to be delivered and situation analysis;
 - potential options to address delivery of scope;
 - requirement for specialist knowledge for the project (if applicable);
 - preliminary costing and timeframes; and
 - review of existing asset base (including biomedical) to identify opportunities for redevelopment of assets;
 - well-argued case for the project, clarifying its objectives in view of competing priorities
 - initial analysis of affordability, funding method and budget impact
 - results of initial consultation with key government agencies to ensure alignment of potentially conflicting policy objectives, and the possible inclusion of additional supporting agencies; and
 - Specialist knowledge may be engaged to assist with project scoping and definition if appropriate.

Step 2.4: Develop Outline Business Case

DHW Infrastructure, in collaboration with the LHNs/ BUs and external consultants (where applicable), is responsible for compiling the considerations into an Outline Business Case.

T117: Policy Guidelines for the evaluation of public sector initiatives must be referred to throughout the preparation of an Outline Business Case a template is provided in Appendix E.

The Outline Business Case is used to describe how services can be delivered to meet SA Health’s strategic objectives for service delivery and the preliminary technical requirements in meeting the strategic objective for service delivery.

The Outline Business Case must include:

- service need problem;
- solution specification – objectives, outcomes, and outputs;
- options analysis – costs, service delivery targets, benefits, risks, implementation timeframe;

- summary of the benefits to be realised in delivering the project; and
- selection of shortlisted options.

A benefits statement must be included as part of the Outline Business Case and a template is provided in Appendix E1. This statement provides Government with confidence that the benefits identified are adequate and aligned with Government’s strategic initiatives.

Infrastructure DHW is responsible for developing the benefits statement in conjunction with the LHN/BU, and with input from DHW Corporate Finance (DTF Liaison) into the financial benefits analysis.

The benefits statement is included in the Outline Business Case as an appendix and must, at a minimum, include:

- preliminary benefits identification; and
- proposed measurement for each benefit.

It is recommended that the DHW Corporate Finance (DTF Liaison) evaluate the Outline Business Case and provide input once prepared.

Step 2.5: Approval of major capital priorities

All Outline Business Cases to be considered in the annual budget bilateral process must be submitted to Infrastructure DHW by the deadline prescribed by ED Infrastructure DHW.

Infrastructure DHW will consolidate all Outline Business Cases for endorsement by ED Infrastructure DHW. This will be followed by submission to the Chief Executive SA Health for approval.

All Outline Business Cases must be approved by the Chief Executive SA Health prior to commencing Business case and Budget bid development. This will ensure the capital priorities are supported for further investigation, and have allocated funding to facilitate the development of a Business case.

Gateway Two – Outline Business case approved for further investigation and Business Case development.

Deliverables	Outline Business Case, Capital project priorities.
Approval Delegate	Chief Executive SA Health

Project Planning and Project Funding

Step 3.1: Stage pre-requisite

To commence the development of a Business case, approval of the Outline Business Case must be obtained from the Chief Executive SA Health for the major capital works project.

DHW Infrastructure should engage with stakeholders throughout the Project Planning phase. The stakeholders include:

- LHNs/BUs;
- DTF; and
- DPTI divisions (e.g. DPTI Building Management; and DPTI Infrastructure).

Step 3.2: Reassess priorities and validate options identified

Infrastructure DHW will assess all information available with the intent of identifying new factors that may have arisen since the completion of the Investment proposal / and or the Outline Business Case, and analyse the impact on the capital project.

LHN/BU and Infrastructure DHW must also analyse additional planning information and validate the benefits statement. This should include analysis of potential changes to priorities and new risks to benefits realisation.

Step 3.3: Masterplan and feasibility study

The masterplan and feasibility assessment process involves four key steps:

- Evaluate project options: Infrastructure DHW is responsible for conducting evaluations of each of the options identified from the Outline Business Case. The evaluation of each option covers:
 - solution specification;
 - delivery timeframe;
 - preliminary cost and benefit estimates; and
 - risks.
- Select preferred project option: after evaluating each option, Infrastructure DHW must select its preferred option.
- Undertake preliminary masterplan design: Infrastructure DHW must develop a preliminary masterplan and undertake feasibility study for the preferred option selected. The preliminary design should include:
 - considerations for design development of the project;
 - estimated costs of completing the project;
 - assessed risk profile and risk management plan; and
 - implementation management plan.
- Engage specialist knowledge for masterplan development: Infrastructure DHW must engage specialist knowledge for concept development as appropriate.

Since Cabinet requires sufficient benefits information through the Business case to make a determination as to whether the proposed major capital works project should be included as part of Government's Capital Investment Program, Infrastructure DHW must also prepare a benefits definition document in conjunction with the LHN/BU, for qualification and quantification of benefits. A benefits realisation template is provided in Appendix F1.

The benefits realisation definition document must be included as part of the business case, and must at a minimum, include:

- Preliminary benefits identification and mapping:
 - benefits scope and objective;
 - baseline measurement for each benefit;
 - identification of target metrics for each benefit;
- Identification of benefits realisation risks and issues;
- Indication of timing for benefits realisation; and
- Benefits realisation risks and issues, and mitigation approaches.

Step 3.4: Prepare Business case and Budget bid

Infrastructure DHW will collaborate with LHNs/BUs in the preparation of the Business case and Budget bid.

Infrastructure DHW is responsible for compiling master plan and feasibility studies, and in collaboration with the LHN/BU, develop the Business case, which must be endorsed by LHN/BU prior to finalisation.

The Business case should address project planning and assessment of the preferred solution. It should also outline project funding and budget impacts. The Business case must include a discussion of the benefits to be realised through undertaking the proposed project.

T117: Policy Guidelines for the evaluation of public sector initiatives must be referred to when preparing the Business case. A Business case template and checklist is provided in Appendix F.

Step 3.5: Business case and Budget bid approval process

The Business case approval process comprises the following three steps:

- LHN Chief Executive Officer Endorsement – Business case and Budget bid must be endorsed by Chief Executive Officer LHN/BU. Once endorsed the Business case and Budget bid is sent to Infrastructure DHW;
- ED endorsement – Business case and Budget bid must be endorsed by the Executive Director Infrastructure DHW. Once endorsed the Business case and Budget bid is sent to the Chief Executive SA Health; and
- Chief Executive Approval – Business case and Budget bid must be approved by Chief Executive SA Health.

Step 3.6: Budget bid submission

The Business case and Budget bid must be approved and submitted to the Chief Executive SA Health (or delegate). The submitted Budget bid must include the Business case as part of the submission.

Depending on the funding amount sought in the Business case, additional approval may be required prior to submitting the Budget bid to Cabinet. Approval threshold requirements are in accordance with *T117: Policy Guidelines for the evaluation of public sector initiatives*, and must be referred to prior to submission.

Gateway Three – Business case and Budget bid approved by Chief Executive SA Health and submitted for consideration on the Government’s Capital Investment Program.

Deliverables	Business case and Budget Bid. Business case and Budget Bid submitted for consideration on the Government’s Capital Investment Program.
Approval Delegate	Chief Executive SA Health

4. Implementation and Monitoring

With reference to the gateways outlined above, the project outcomes / deliverables and the approval authority delegate is summarised in the table below. Relevant delegate must be consulted to ensure appropriate approval processes.

Gateway	Documents required	Approval Delegate
Gateway One	Completed Capital Works Investment Proposal	Chief Executive SA Health
Gateway Two	Completed Capital Works Outline Business Case	Chief Executive SA Health
Gateway Three	Completed Capital Works Business Case and Budget bid.	Chief Executive SA Health

5. National Safety and Quality Health Service Standards

N/A

6. Definitions

- **Business Units (BU)** means the Statewide Service unit within SA Health for which the major capital works project is being delivered (including SA Ambulance Service).
- **Department or DHW** means the Department for Health and Wellbeing.
- **DPTI** means the Department of Planning Transport and Infrastructure.
- **DHW Infrastructure Branch (Infrastructure DHW)** means the Infrastructure Branch in the Finance and Corporate Services Division of the Department for Health and Wellbeing.
- **DPTI Infrastructure** means the Infrastructure Branch of the Department of Planning Transport and Infrastructure.
- **Local Health Network** means the Local Health Network for which the major capital works project is being delivered.
- **Capital works projects** means any capital works project as defined in the Premier and Cabinet Circular PC028. This Policy Directive refers to any building work / construction project funded through the major capital program.
- **Major capital works** means all capital works projects requiring submission to bilateral budget bids; and
- **Minor works** means capital works projects delivered through DHW's recurrent funding for asset maintenance.
- **Specialist Knowledge** means the architect, engineers, cost managers and other professional service providers that are engaged to assist with the design, documentation and construction of the major capital works project.
- **SA Health** means the health portfolio of services and agencies responsible to the Minister for Health and Wellbeing.

7. Associated Policy Directives / Policy Guideline & Resources

The following documents should be referred to throughout the lifecycle of SA Health capital works projects:

- Capital Works Policy Directive;
- Capital Works: Implementation Policy Guideline
- Capital Works: Implementation Review Policy Guideline
- Capital Works: Benefits Evaluation Policy Guideline

8. Document Ownership & History

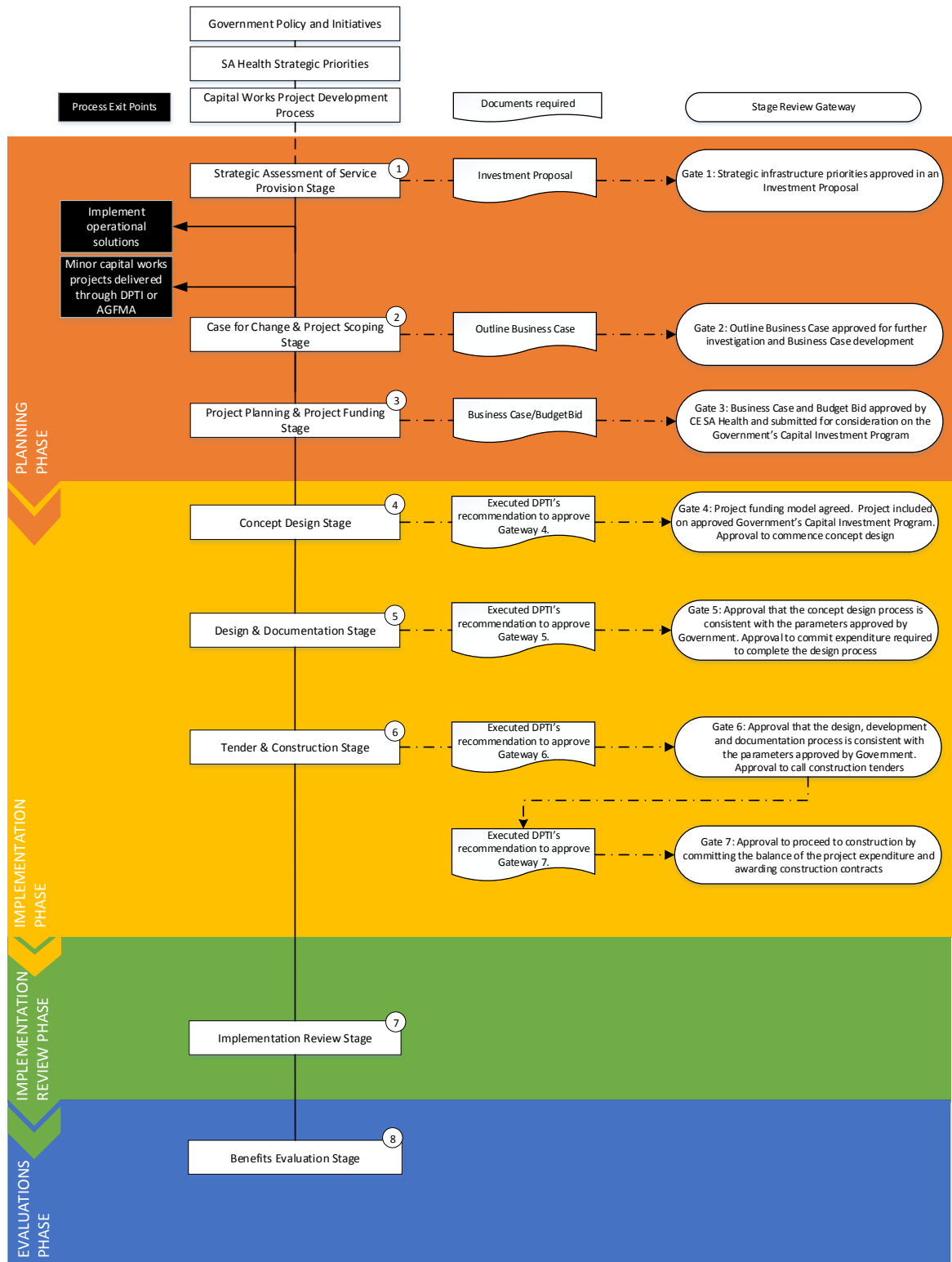
Document developed by: Infrastructure
File / Objective No.: 2017-05231 | A795297
Next review due: 31/08/2023
Policy history: Is this a new policy (V1)? **Y**
Does this policy amend or update an existing policy? **N**
Document supports the Capital Works Policy
If so, which version?
Does this policy replace another policy with a different title? **N**
If so, which policy (title)?

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Approval Date	Version	Who approved New/Revised Version	Reason for Change
17/09/2018	V1	SA Health Policy Committee	Original SA Health Policy Committee approved version.

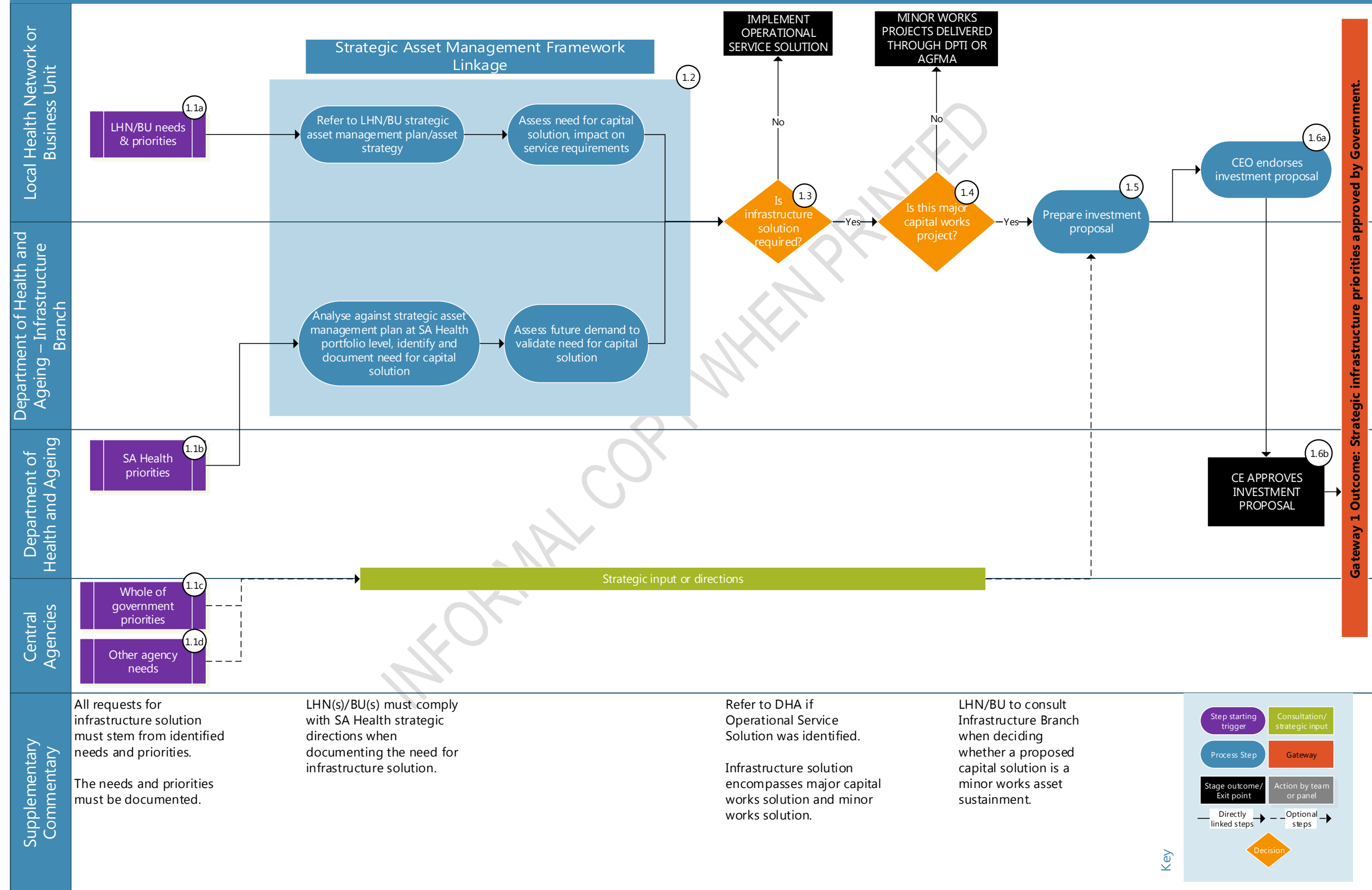
Appendix A: Process Maps

SA Health Capital Works Project Delivery Lifecycle



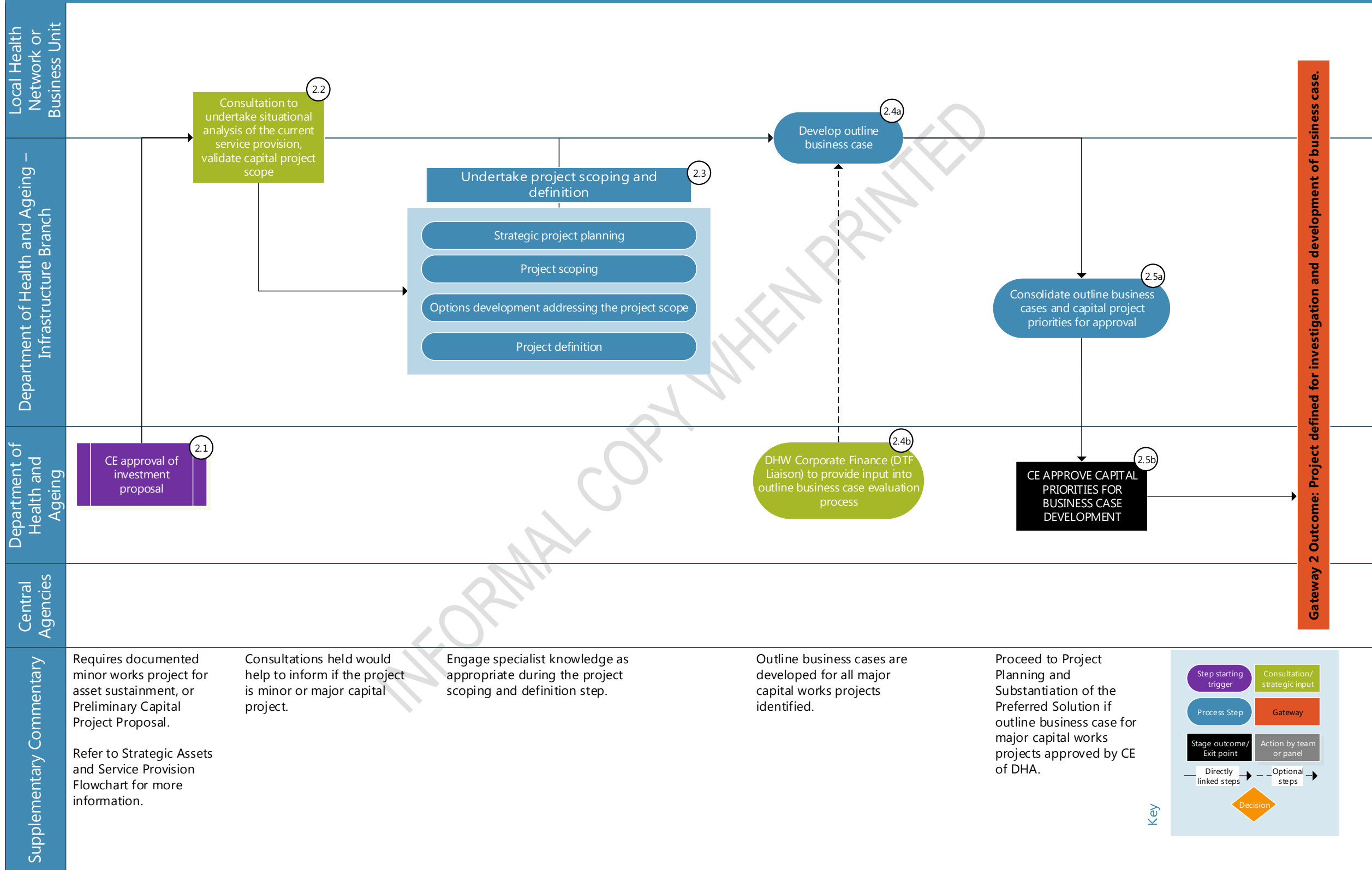
SA HEALTH CAPITAL WORKS PROJECT PROCESS FLOW MAP – PROJECT PLANNING PHASE

Strategic Assessment of Service Provision Stage



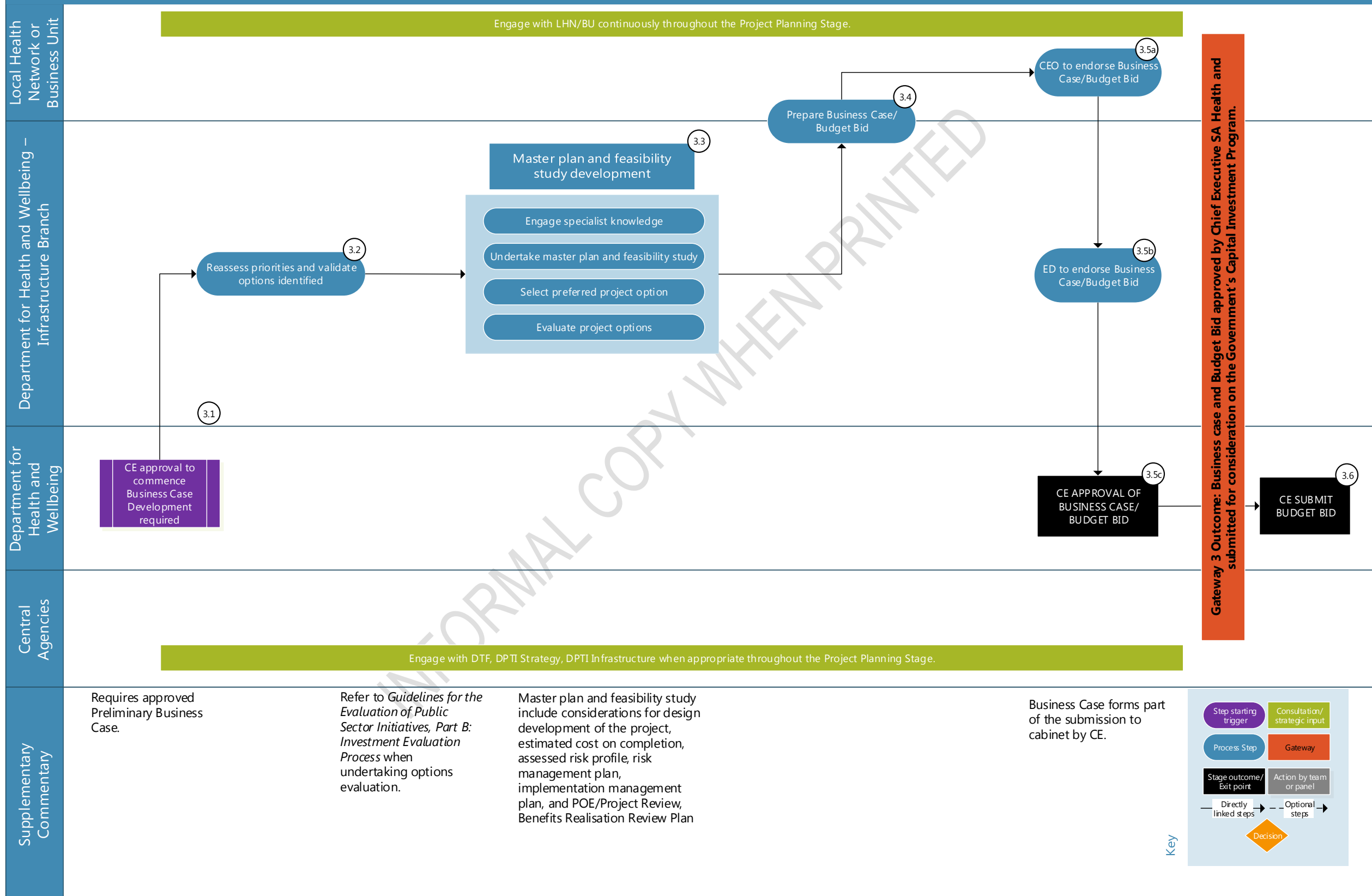
SA HEALTH CAPITAL WORKS PROJECT PROCESS MAP – PROJECT PLANNING PHASE

Case for Change & Project Scoping Stage



SA HEALTH CAPITAL WORKS PROJECT PROCESS FLOW MAP – PROJECT PLANNING PHASE

Project Planning & Project Funding Stage



Appendix B: Gateway Checklist

To complete this checklist, click on the tick boxes in the approved column corresponding to the activity done. Afterwards, sign the authorisation box and email to the approving Project Manager or similar.

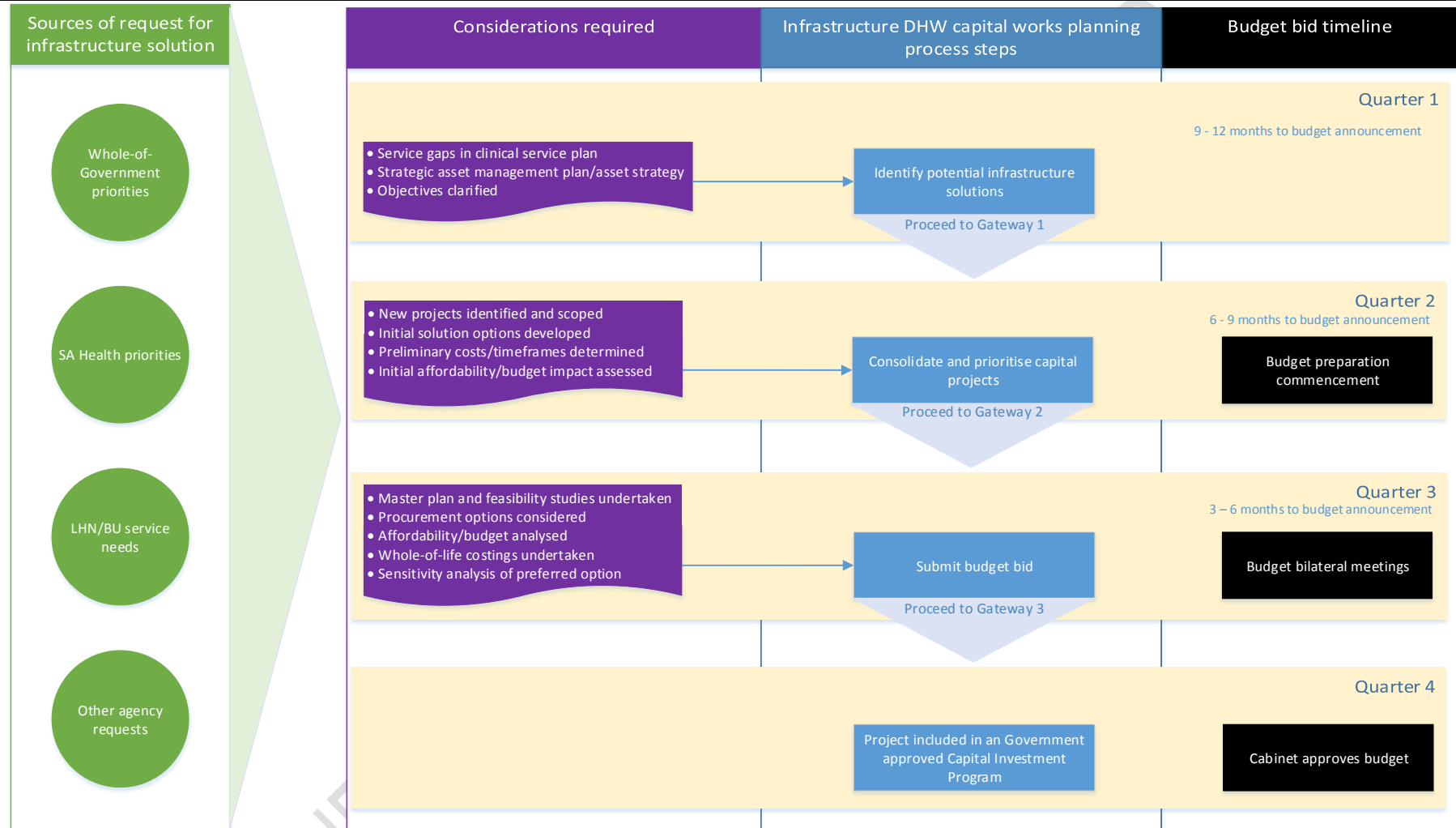
✓	Task
GATEWAY ONE: Strategic analysis and identification of capital needs (Investment Proposal)	
<input type="checkbox"/>	Investment proposal completed including: <ul style="list-style-type: none"> • Documented need for capital solution assessed by DHW and LHN/BU against strategic asset strategies and; • Solution objectives, including type of capital solution required, anticipated benefits, estimated expenditure and timeline.
<input type="checkbox"/>	Chief Executive Officer LHN and Chief Executive SA Health approval of Investment proposal granted
GATEWAY TWO: Outcome of case for change and project scope (develop Outline Business Case)	
<input type="checkbox"/>	Outline Business Case for major capital works developed, including service need problem, solution specification, options analysis and selection of shortlisted options.
<input type="checkbox"/>	Approval from Chief Executive SA Health sought and granted to commence business case development.
GATEWAY THREE: Business case completed and approved	
<input type="checkbox"/>	Infrastructure DHW has assessed all information available to identify new factors that may have arisen since the completion of the Investment proposal and / or Outline Business Case.
<input type="checkbox"/>	Preliminary concept design undertaken for preferred option selected.
<input type="checkbox"/>	Business case and budget bid completed and approved by Chief Executive Officer LHN.
<input type="checkbox"/>	Business case and budget bid approved and submitted by the CESA Health.

Checklist Authorisation

Approved by	
Executive Delegate LHN/BU	Date

Endorsed by	
Executive Director Infrastructure DHW	Date

Appendix C: Overview of Infrastructure Capital Budget Process



Infrastructure Capital Budget Timetable

Considerations required	Documented evidence for considerations required	Responsibility	Due date
Identify potential infrastructure solutions			
Service gaps in clinical service plan	Description of preferred service model		
Assessment of local asset portfolio	Description of condition of current assets for the preferred service model		
Definition of objectives and need for infrastructure solution	Evaluation of current asset's capabilities to meet service needs		
Output: Investment Proposal			xx September 20xx
Consolidate and prioritise capital projects			
Scope of new projects	Situational analysis of service need based on clinical service demand forecasting		
Option development	Solution specifications Initial considerations for benefits realisation		
Preliminary cost and timeframes analysis	Preliminary financial and social economic evaluations Preliminary implementation management plan		
Initial affordability / budget impact assessment	Considerations for ongoing operational budget impact and FTE impacts		
Output: Outline Business Case			xx November 20xx
Submit Budget Bid			
Design development	Description of preferred solution Concept designs		
Whole-of-life costing	Triple bottom line costings of capital and operational budget requirements Sensitivity analysis of preferred option		
Implementation plan development	Final implementation management plan Procurement plan Benefits realisation definition		
Affordability and budget impact	Ongoing operational budget impacts and FTE impacts table		
Output: Business Case			xx February 20xx
Infrastructure DHW consolidates projects bids and prepare capital budget			xx March 20xx
Budget confirmation			xx June 20xx

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Capital Works Projects: Investment Proposal Template

Version No.: 1.0
Approval date: xx

Agency Details

LHN and Unit:

Project Proposal

Project Name:

Project Summary

Objectives - The service outcomes, outputs required

Describe the preferred service model required to meet a service need, including current understanding on future levels of service, and justify why the preferred service model is most suitable to meet service need

Business / Policy Context

Describe how the preferred service model meets current SA Health business priorities or policy requirements.

Project Complexity Assessment / Constraints

Evaluate current asset portfolio's capabilities to meet the preferred service model and service need.

Please describe the relevant constraints and shortfall in current asset class.

Project Scope of Works

Describe briefly the scope of the infrastructure solution required, and describe how this will resolve the relevant constraints identified.

Feasibility Implementation Strategy

Describe the following for the infrastructure solution identified:

- breakdown of expenditure estimate of the capital solution (excl. GST)
- estimated timeline for capital solution delivery.

What Benefits / outcomes will the project achieve
Describe the benefits derived from the capital solution.

PREPARED:		Date:		/		/	
(for acceptance)	<Name> < Position>, <Business Unit>						
ACCEPTED:		Date:		/		/	
(for release)	<Name> <Position>, <Business Unit>						

Project Budget Estimate

Project Budget Requirement:	\$ (GST exclusive)
-----------------------------	--------------------

Approved by Chief Executive SA Health

Budget Estimate Endorsed:	\$ (GST exclusive)
Endorsed By:	
Delegate Name	
Delegate Position	Chief Executive, SA Health
Delegate Signature	
Date	

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Capital Works Projects: Outline Business Case Template

Version No.: 1.0
Approval date: xx

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Outline Business Case

1. Executive summary

The Executive summary should be a stand-alone document, which summarises the rationale for proceeding with further analysis of a proposal and the development of a business case.

2. Strategic assessment of the service provision

This section should provide:

- a description of the type, scope, outcomes, outputs, and timing of services currently being provided (where applicable)
- a description of key stakeholders and beneficiaries and any key relationships and/or interdependencies associated with the service provision.
- consideration of any other public and private service providers and the market in which these services are provided.
- a discussion concerning the implication(s) of the lead agency continuing, discontinuing, expanding or retracting the service provision.
- justification that the lead agency is the most appropriate agency to continue providing the service provision going forward.
- any exemptions regarding the application of the Policy Guideline should also be described here e.g. whether a particular cohort of SA Health employees are exempt from some or all of its requirements.

3. Service need problem and Case for Change

3.1 Situational assessment of the current service provision

This section should include:

- a description of the common and specific demand drivers that impact on current service provision demand.
- details of the current service levels and capacity in volume and quality terms.
- details of existing physical assets used in meeting service demands.
- details of the operating and investing expenses and revenue impacts involved in providing the service provision over time.

3.2 Service demand forecasting

This section should include:

- an assessment of the potential external and internal factors impacting upon the identified demand drivers going forward.
- details of national and international statutory standards, technical standards, legislation and policies that may impact on the service provision going forward.
- a description of the methodology employed in forecasting future service demand.
- details of different service demand forecast scenarios and the determination of the 'most likely' projected service demand over a relevant time horizon.
- details of assumptions made and level of uncertainty inherent in forecasting service demand.

3.3 Identification of the service need problem

This section should include:

- a clear description of the service need problem in terms of cause and effect, and with reference to the forecasted service demand, existing service provision capacity, government's policy targets and outputs, and the lead agency's targeted service delivery outcomes and outputs.
- a discussion of the consequences of the government not addressing this problem.
- details for the appropriate timing for addressing the problem.
- details of any other evidence for the problem that further supports the case for change.

3.4 Solution specification

This section should include:

- a detailed solution specification for addressing the problem that identifies the primary and secondary objectives to the government, and specific lead agency outcomes and outputs requirements and any other relevant social, economic and environmental impacts.
- a description of key performance indicators to be used in the post-implementation review plan.

3.5 Options analysis

This section should include:

- a specification of the base case option with reference to the solution specification.
- preliminary details and specification of a long list of realistic service delivery options with reference to the solution specification.
- a preliminary impact assessment of all long-listed options (including the base case).

3.6 Selection of short-listed options

This section should include:

- a preliminary explanation and description of the rationale for selecting the short-list of options.
- a preliminary recommendation of at least three short-listed options (including the base case).

Associated detailed analysis underlying the above should be provided in appendices of the Outline Business Case. This may include the extent of consultation undertaken with stakeholders, and other government agencies including DPTI and OCIO (where applicable).

4. Project planning and substantiation of the preferred solution

4.1 Evaluation period(s)

This section should include:

- preliminary details of the evaluation period(s) used in assessing the short-listed options.

4.2 Discount rate(s)

This section should include:

- preliminary details of the discount rate(s) applied in assessing the short-listed options.

4.3 Financial evaluation

This section should include:

- preliminary details on the cost and benefit cash flows impacting on government for each short-listed option.

4.4 Socioeconomic evaluation

This section should include:

- a preliminary description of categorised socioeconomic impacts for each short-listed option
- preliminary details on the basis for quantifying the identified cost and benefit impacts that can be monetised and the outcomes of a cost benefit analysis (CBA) for each short-listed option.
- preliminary details on the basis for quantifying the cost and benefit impacts where the benefits can only be measured in physical units and the outcomes of the cost effectiveness analysis (CEA).
- a preliminary description of all other significant non-measurable cost and benefit impacts.

Associated detailed analysis underlying the above should be provided in appendices of the Outline Business Case. This may include the extent of consultation undertaken with stakeholders, and other government agencies including DPTI and OCIO (where applicable).

4.5 Benefits sought

This section should include:

- An outline of the benefits sought in delivering this project;
- How the benefits will be realised.

Note that the benefits statement template (Appendix E1) must be completed and attached as part of the Outline Business Case submission. The document must be kept on file for the purposes of benefits evaluation.

5. Agency sign-offs

This section should include details of the name and position title of lead agency officers and their signature.

Appendix E1: Benefits Statement Template

The Benefits Statement is a key input into the Outline Business Case and focuses on preliminary identification of benefits and processes for monitoring and realising them throughout the project. Specific objectives at this stage include:

- confirming the need for investment;
- identifying the benefits anticipated from the proposed project; and
- assessing the expected effectiveness of the investment.

This section identifies all known potential benefits derived from the project, and provides an overview of the type of benefits, and how the benefits will be measured.

1. Benefits sought

Identify and list all benefits in the table below, which may fall into the following categories:

- Cost reduction;
- Service improvements;
- Risk reduction;
- Productivity;
- Workforce satisfaction;
- Clinical/patient outcomes;
- Department reputation;

Benefit	Rationale	Methods of measurements

2. Benefits measurement

Include measurable benefits only, and describe the benefits based on:

- Quantitative benefits, developed with input from DHW Corporate Finance (DTF liaison) as appropriate;
- Qualitative benefits, with overview on how the benefits will be measured.

For large projects, refer to the benefits identification tool in appendix for assistance with identifying benefits.

3. Benefits realisation plan

Describe the benefits monitoring processes including:

- who will be involved in monitoring (i.e., identify the Local Health Network or Business Unit, and all government agencies involved in the monitoring);
- how will the benefits will be monitored;
- what evidence will be sought to demonstrate realisation of benefits;
- frequency of benefits realisation reviews;

Approach to handling new information

Describe the process for accounting for new benefits, to ensure that all benefits are captured.

4. Project Benefits

This section should include a summary of:

- Key benefits to be realised in this project.
- Potential dis-benefits realised in the project, and courses of actions to minimise the risk of dis-benefits.
- Benefits realisation governance approach.

Note that the benefits statement forms the basis of benefits definition (template provided in Appendix F1), which must be completed and attached as part of the business case submission. The document must be kept on file for the purposes of benefits evaluation.

5. Appendices

Attach any other items that could be used to support the benefits statement.

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Capital Works Projects: Business Case

Version No.: 1.0
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1. Executive summary

The Executive summary should be a stand-alone document, which summarises:

- the selection of the preferred solution
- the risk management plan for implementing the preferred solution
- the implementation management plan for delivering the preferred solution
- the post-implementation review plan for the preferred solution
- a communication strategy (if applicable) for the preferred solution
- the budget impacts associated with the preferred solution.

2. Strategic assessment of the service provision

This section should provide:

- a description of the type, scope, outcomes, outputs, and timing of services currently being provided (where applicable)
- evidence that the current service provision is consistent with the government's policy targets and objectives, and lead agency's targeted service delivery outcomes (results sought) and outputs.
- a description of key stakeholders and beneficiaries and any key relationships and/or interdependencies associated with the service provision.
- a description of any other public and private service providers and the market in which these services are provided.
- a discussion concerning the implication(s) of the lead agency continuing, discontinuing, expanding or retracting the service provision.
- justification that the lead agency is the most appropriate agency to continue providing the service provision going forward.

3. Service need problem and case for change

3.1 Situational assessment of the current service provision

This section should include:

- a description of the common and specific demand drivers that impact on current service provision demand.
- details of the current service levels and capacity in volume and quality terms.
- details of existing physical assets used in meeting service demands.
- details of the operating and investing expenses and revenue impacts involved in providing the service provision over time.

3.2 Service demand forecasting

This section should include:

- an assessment of the potential external and internal factors impacting upon the identified demand drivers going forward.
- details of national and international statutory standards, technical standards, legislation and policies that may impact on the service provision going forward.
- a description of the methodology employed in forecasting future service demand.
- details of different service demand forecast scenarios and the determination of the 'most likely' projected service demand over a relevant time horizon.
- details of assumptions made and level of uncertainty inherent in forecasting service demand.

3.3 Identification of the service need problem

This section should include:

- a clear description of the service need problem in terms of cause and effect, and with reference to the forecasted service demand, existing service provision capacity, government's policy targets and outputs, and the lead agency's targeted service delivery outcomes and outputs.
- a discussion of the consequences of the government not addressing this problem.
- details for the appropriate timing for addressing the problem.
- details of any other evidence for the problem that further supports the case for change.

3.4 The solution specification

This section should include:

- a detailed solution specification for addressing the problem that identifies the primary and secondary objectives to the government, and specific lead agency outcomes and outputs requirements and any other relevant social, economic and environmental impacts.
- a description of key performance indicators to be used in the post-implementation review plan.

3.5 Options analysis

This section should include:

- a specification of the base case option with reference to the solution specification.
- details and specification of a long list of realistic service delivery options with reference to the solution specification.
- an impact assessment of all long-listed options (including the base case).

3.6 Selection of short-listed options

This section should include:

- explanation and description of the rationale for selecting the short-list of options.
- recommendation of at least three short-listed options (including the base case).

Associated detailed analysis underlying the above should be provided in appendices of the Business case. This may include the extent of consultation undertaken with stakeholders, and other government agencies including DPTI and OCIO (where applicable).

4. Project planning and substantiation of the preferred solution

4.1 Evaluation period(s)

This section should include:

- details of the evaluation period(s) used in assessing the short-listed options.

4.2 Discount rate(s)

This section should include:

- details of the discount rate(s) applied in assessing the short-listed options.

4.3 Financial evaluation

This section should include:

- details on the cost and benefit cash flows impacting on government for each short-listed option.

- details of the sensitivity and scenario analysis undertaken and confirm 'most likely' cash flow estimates.
- a ranking of the options according to the outcomes of the discounted cash flow analysis and discuss the rationale (where multiple financial measures have been applied) in determining the relative merits of competing options according to the financial evaluation.
- a statement regarding the preferred solution according to the financial evaluation.

4.4 Socioeconomic evaluation

This section should include:

- a description of all categorised socioeconomic impacts for each short-listed option
- details of the basis for quantifying the identified cost and benefit impacts that can be monetised and the outcomes of a cost benefit analysis (CBA) for each short-listed option.
- details of the basis for quantifying the cost and benefit impacts where the benefits can only be measured in physical units and the outcomes of the cost effectiveness analysis (CEA).
- a description of all other significant non-measurable cost and benefit impacts.
- details of the sensitivity and scenario analysis undertaken and confirm 'most likely' cash flow estimates.
- a discussion of the distributional impacts associated with each short-listed option and whether the design and scope of each option has taken into account these distributional impacts (where applicable)
- a ranking of the options according to the outcomes of the CBA, CEA and consideration of the non-measurable impacts, and discuss the rationale applied in determining the relative merits of competing options according to the socioeconomic evaluation.
- a statement on the preferred solution according to the socioeconomic evaluation.

4.5 Preferred solution

This section should include:

- a detailed description and rationale applied in integrating the outcomes of the financial and socioeconomic evaluations used to select the preferred solution

4.6 Other requirements

This section should include:

- a detailed risk management plan for the preferred solution.
- a detailed implementation management plan for the preferred solution.
- a detailed post-implementation review plan for the preferred solution.
- a detailed communication strategy for the preferred solution (where applicable).

Associated detailed analysis underlying the above should be provided in appendices of the Business case. This may include the extent of consultation undertaken with stakeholders, and other government agencies including DPTI and OCIO (where applicable).

5. Project funding and budget impacts

This section should include:

- the budget impacts table for the preferred solution.
- the FTE impacts table for the preferred solution.

Note that the detailed calculations associated with the budget and FTE impacts should be prepared in consultation with DTF and included in an appendix of the business case.

6. Project benefits

This section should include a summary of:

- Key benefits to be realised in this project.
- Potential dis-benefits realised in the project, and courses of actions to minimise the risk of dis-benefits.
- Benefits realisation governance approach.

Note that the benefits definition template (Appendix F1) must be completed and attached as part of the business case submission. The document must be kept on file for the purposes of benefits evaluation.

7. Agency sign-offs

This section should include details of the name and position title of lead agency officers and their signature.

Appendix F1: Benefits Definition Template

Benefits definition focuses on ensuring a project accurately defines and delivers the anticipated benefits and is a key input into the Business Case. The specific objectives of benefits definition include:

- ensuring a focus on real outcomes and alignment to Government and SA Health's strategic objectives;
- developing a plan for accurately measuring benefits;
- mitigating against the risk of failing to realise benefits; and
- identifying opportunities for improvements or necessary adjustments.

Benefits definition also assists in identifying and analysing any additional planning information, potential changes to priorities or new risks that have arisen since benefits statement was prepared.

This section identifies all potential benefits derived from the project, and provides an overview on the type of benefits, and how the benefits will be measured.

1. Benefits definition

Each benefit should be defined in terms of:

- Objectives: each benefit should clearly align to the overall project objectives
- Scope: ensure the benefits are within the scope of the project; identify any risks of double-counting benefits (e.g. other projects, workstreams, etc)
- Actions: ensure the Business case/project plan includes all the actions required to deliver the benefits; identify enablers to achieving the benefits.

2. Benefits measurement

Include measurable benefits only, and describe the benefits based on:

- Quantitative benefits, developed with input from DHW Corporate Finance (DTF liaison) as appropriate;
- Qualitative benefits, with overview on how the benefits will be measured.

Benefits should be categorised based on the following:

- Cost reduction;
- Service improvements;
- Risk reduction;
- Productivity;
- Workforce satisfaction;
- Clinical/patient outcomes; and
- Department reputation.

The table below is a suggested method of presenting the information. An example has been provided in the table.

For large projects, refer to the benefits identification tool appended at the end for assisting with identifying benefits.

Benefit description	Benefit category	Current baseline	Target metric	Measurement	Assumptions	Responsible business unit	Review frequency	Date for realisation
Increase in outpatient occasions of service in Oncology	Service Improvement	3,994 per annum	5,256 per annum	Indicator	Consistent catchment	Oncology	Yearly	1 year following hospital opening

Dis-benefits

Include any dis-benefits and show how they are being reduced, minimised or mitigated.

Dis-benefit	Benefit category	Current baseline	Target metrics	Responsible business unit
Increase in average waiting time for outpatients due to increase in capacity	Service improvements	10% outpatients experiencing waiting time longer than 1 hour	7% outpatients experiencing waiting time longer than 1 hour	Oncology

3. Governance approach

This section describes the approach for benefits realisation, including considerations for:

- roles and responsibilities;
- steps to achieving benefits;
- resources, budget, and timeframe;
- risks, assumptions and dependencies; and
- monitoring processes.

Roles and responsibilities

The following table defines some example roles and responsibilities associated with benefits management. Consider the requirement for the appointment of these roles and responsibilities relative to the project, and assign responsibilities as appropriate.

Role	Benefits management description
Project manager	<ul style="list-style-type: none"> • Lead the project/program • Stakeholder analysis and management • Monitor the effectiveness and timeliness of change activities
Benefits realisation manager	<ul style="list-style-type: none"> • Document benefit definitions, calculations and monitoring rules • Build benefit hypotheses and method for testing and verifying those assumptions • Determine baseline collection process, templates, etc • Document project benefits • Develop benefits realisation schedule
Benefit owner	<ul style="list-style-type: none"> • Accountable for achieving and realising a specific benefit.
KPI/measure owners	<ul style="list-style-type: none"> • Responsible for granting access to data that will be used to measure achievement of benefits • Validation of benefits data where they have ownership

Role	Benefits management description
Business readiness manager	<ul style="list-style-type: none"> • Develop and action business readiness plan to manage key activities required to transition people and processes • Lead the identification of impacts arising from the project • Drive the design and implementation of roles and responsibilities • Support the Communications team by contributing to the design and development and delivery of communication activities

For larger projects, it is advisable to agree the responsibilities for benefits realisation within teams. A RACI (Responsible, Accountable, Consulted and Informed) matrix should be customised to show the responsibilities.

Risks, assumptions and dependencies

Confirm and update and significant risks, assumptions and dependencies to the project:

- significant risks to the realisation of the benefits and what actions could be taken to mitigate the risks;
- assumptions associated with the realisation of benefits identified; and
- dependencies or constraints to benefits realisation.

Benefits monitoring

Reference how the measurable benefits will be monitored, including:

- Frequency of interim reports (SA Health Capital Works Projects: Benefits Evaluation Policy Guideline recommends quarterly reporting);
- Data collection methods; and
- Monitoring and data collation responsibilities.

Include any key steps in the completion of benefits, and alignment of benefit reporting to project implementation milestones, and handover of benefits realisation to the business as usual teams.

Resources, budget and timeframe

Reference project governance structure developed for the project, and outline the project documents and requirements for benefits management.

4. Appendices

Include documents such as:

- Template for documenting current state, future state and associated benefits;
- Completed benefits identification tool (appended in Benefits Statement template); or
- RACI or document that outlines roles and responsibilities.

5. Benefits identification tool

Note: This template can be used to define a single benefit to provide an understanding of its attributes.
Delete 'RED' instructions when completing the template.

Benefit

Project name: Initiative or Program or Project

Benefit name: Brief sentence on the measurable improvement

Benefit description: Could include the benefit rationale or business problem the project is addressing

Benefit type: Observable, measurable, quantifiable, financial.

Benefit classification: Cost reduction, service improvement, risk reduction, productivity, workforce satisfaction, clinical/patient outcome, department reputation

Objective/organisational goal: List Government initiatives, program or objectives, or SA Health strategic objectives this initiative is aligned to achieve

Benefit assumptions: List the assumptions, associated with the realisation of the benefits

Risks/issues: Tracking risks and issues will help better estimate the degree a benefit will be realised

Benefit owner: Accountable clinical lead, or the person responsible for the realisation of the benefit

Measures

Measurement description: Number of...		
Start date: DD/MM/20YY	End date: DD/MM/20YY	Data source: Where will the data come from?
Owner: Name of responsible manager	Review frequency: i.e. Quarterly	Unit: Number, time, percentage?
Baseline value: n1	Target value: n2	Detailed benefit calculation method: xx

6. Benefits register

The outcome owner is accountable for updating the benefits register, and the measure owner is responsible for updating the benefits register on a monthly basis.

It is recommended that the measure owner records information reflected below in an Excel worksheets, and report to outcome owner on a quarterly basis, before the interim benefit report is required.

A pro forma has been provided below:

Benefit Description	Outcome Owner	Measure Name	Measure Owner	Metric Type	Data source	Baseline	Target (Current)
<i>The name of the relevant outcome</i>	<i>The name of the person accountable for tracking the benefit</i>	<i>The name of the measure</i>	<i>The best authority responsible for tracking the measure</i>	<i>Quantitative vs qualitative</i>	<i>Where will this data come from? E.G., Name of system and code number. Whenever possible use measures that already exist.</i>	<i>The starting figure at commencement of the project</i>	<i>The goal for the current period</i>

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