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Business Case/Project Charter

<Throughout this document there is text formatted in the same manner as this text. This text is guidance text to help you use this template and create your document from it. When you no longer need the guidance text, it can be removed from your document by selecting "Remove all guidance paragraphs" from the IHTSDO menu. Please note that if you have formatted any of your text in the same manner, then it will also be removed, so avoid using this formatting (italic with a light green background) for any of your text.>.

Project Identification Information which provides a means of identifying this prospective project going forward;

a. Project Name: Provide a unique brief name for the project.

b. Proposal No: This number assigned by Finance will be entered here

c. Description: Describe the project in one or two sentences to give the reader an understanding of the project.

d. Project Manager: Identify project manager if one has been assigned, otherwise use responsible Senior Management Team Executive bringing the project forward for approval.

e. Project Type Internal/External: Indicate external if project is to receive any exposure outside IHTSDO.

f. Est. Budget: indicate total budget from Project Budget below.

g. Strategic Alignment: Indicate key corporate strategic objectives the project is aligned with.

1. *Demonstrate successful large scale implementations of SNOMED CT.*
2. *Remove barriers to adoption for our customers and stakeholders.*
3. *Enable continuous development of our product to meet customer requirements.*
4. *Provide scalable products and services that drive SNOMED CT adoption.*
5. *Set new trends and shape new technologies that increase the overall use of SNOMED CT.*

1. PROJECT IDENTIFICATION					
Project Name:					
Proposal No.					
Description:					
Project Manager:		External		Est. Cost/Budget	N/A
Strategic Alignment	Enable continuous development of our product to meet customer requirements.				

Revision History Information detailing significant updates to the document.

2. REVISION HISTORY			
Date	**Version**	**Description**	**Author**

Project Initiation and Background – Provide the reader with a brief description of why the project has been initiated including who initiated the project (internal or external) and why the project is being brought forward.

3. PROJECT INITIATION, PROBLEM STATEMENT AND/OR BACKGROUND

Project Objectives – Indicate the key objectives to be accomplished through a successful completion of the proposed project.

4. PROJECT OBJECTIVES

Project Benefits – Document the internal and external benefits which will be achieved if this project is approved and implemented as proposed. Consider including non monetary returns on investment such as time savings, better data for decision making and reporting, increased level of service provision, reduced number of customer complaints, timely regulatory compliance and improved quality of product. Also consider; PEOPLE/COMMUNITY - does the project help the organization to be more socially responsible and PLANET - does the project help the organization be more environmentally sustainable. Finally, comment on how the project helps the organization to meet its Mission, known as ROM, Return on Mission. Information in relation to the current strategy and mission can be found here. List Value Proposition benefits for Stakeholders such as a reduction of coding burden, indicative cost savings, improvements to the clinician experience of recording and accessing SCT coded information and how the citizen/patient experience could be improved.

5. PROJECT BENEFITS

Project Schedule – Provide a list of milestones and associated tasks illustrating the timeframe for key milestones and the major activities associated with these milestones. This should be kept at a high level and include any major deliverables expected to be delivered by the project.

6. PROJECT SCHEDULE

Project Approach – Describe how the project will be undertaken. Are internal and/or external resources to be used? Will a procurement be required? Which IHTSDO Lines of Business will be engaged? Will physical deliverables be produced?

7. PROJECT APPROACH

Project Impacts – List how completion of the proposed project will impact the impacted clients (indicate which clients in bullets), IHTSDO systems (tooling) and also indicate impact of not pursuing the proposed project.

8. PROJECT IMPACTS		
CLIENT: ☐	SYSTEM or SNOMED: ☐	DO NOTHING (if project not approved) ☐

Project Scope- Indicate the scope of the project which includes what specifically is in scope of the project and also any relevant scope exclusions that may apply.

9. PROJECT SCOPE
The scope of the project includes:
The scope of the project excludes:

Planning Assumptions – Document any assumptions used to develop the project proposal

10. PLANNING ASSUMPTIONS
The following planning assumptions have been defined for the project:

Project Constraints and Dependencies – Identify any specific constraints which have been placed on the proposed project, such as dates, budget, resources or other external parameters. Dependencies on other organizations, lines of business or projects should be documented here.

11. PROJECT CONSTRAINTS AND DEPENDENCIES
The following constraints have been defined for the project:
The following project dependencies have been identified for the project:
What related changes may need to be done in order to meet requirements:

Formal Deliverables – If the project is to produce formal deliverables, list all these here, including a description of the deliverables to inform the reader.The anticipated contract value or cost of each specific deliverable should be documented.

12. FORMAL DELIVERABLES (*required to be delivered to the Customer*)		
Name	**Deliverable Description**	**Deliverable Cost**

Resource requirements – Document internal and external resources and the estimated time commitment associated with each. Cost of these resources will be detailed in Project Budget Spreadsheet.

13. RESOURCE REQUIREMENTS	
Resource Description / Type	**Total Time Estimate**
PROJECT TOTALS	Nil

Project Risk Assessment – What are the risks of the project? For help in brainstorming about risks, please see this document: https://docs.google.com/document/d/1neQEJv5C-5N2D_BvS-eYcwEBLYZoW19KK1djs93SP58/edit?usp=sharing

14. PROJECT RISK ASSESSMENT
Insert results of Risk Assessment exercise here

Critical Success Factors – Key factors which will directly impact the success of the proposed project shall be documented. This may include influencers who are internal or external to IHTSDO.

15. CRITICAL SUCCESS FACTORS

Conditions for Success	Person / Group Primarily Responsible to Establish the Condition	Impact if Condition Not in Place
Availability of key Stakeholders	**CEO**	

Sign off – The Senior Management Team Executive responsible for seeking project approval must approve the proposal prior to project approval submission. Electronic signature is fine.

16. PROJECT CHARTER SIGN OFF	
Sponsor Name	
Signature	
Date	

Sign off – The CEO must approve the proposal prior to project approval submission. Electronic signature is fine.

17. CEO APPROVAL	
CEO Signature	
Date approved by CEO	

Sign off by Finance & Corporate Services Executive Lead after final approval (for example by Management Board).

18. WORK ITEM SIGN OFF	
Chief Terminologist	
Date approved	