

# **Project Charter**

**Project Name:** 

**Eclipse Project ID #:** 

## **Project Executive Sponsor:**

**Project Champion:** 

**Project Management Lead:** 

Author:	Version #:	V0.1
Status:	Version Date:	yyyy/mm/dd

◆ If you require assistance completing this document, please contact the Project Management Office, ext. 42720

• Please refer to the Project Management Office Intranet site for a complete Glossary of Project Terms

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## **Purpose of Document**

The Project Charter documents the project objectives, scope, stakeholders, deliverables, and constraints. These items form the basis for estimating, planning, performing and tracking the project activities throughout the project lifecycle. As a summary of the project plan, the project charter should be reviewed & sign off by the project sponsor, champion & stakeholders prior to project execution.

The purpose of the Project Charter is threefold:

- 1. To establish and ensure a common understanding between all parties of the objectives, scope and requirements this project will address;
- 2. To ensure a common understanding of the work to be performed, the deliverables, the methodology to be used and the roles and responsibilities of all parties; and
- 3. To provide the project team with a baseline document (scope, tasks, estimates and deliverables) from which to carry out the work, and to measure the progress and success of the project

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## 1.0 Purpose Statement

Describe what this project is aiming to achieve. What need, opportunity or problem will it address? Explain how this project is helping to achieve organizational or departmental goals.

## 2.0 Background Information

Explain at a high-level, the background necessary to understand why the project is being undertaken.

## 3.0 Project Scope

Identify 'what is' and 'what is not' included as part of the work to be performed on the project. Place "must have" requirements in the "IN" scope section. Spell out any exclusion, i.e. work that will not be performed, in the "OUT" of scope section.

IN Scope	OUT of Scope
•	•
•	•
•	◆
•	•

4.0 Objectives, Deliverables, Performance Measures & Benefits						
Provide the details of what this project ai	ms to accomplish by listing its specific com	nitments, measures and benefits.				
Project Objectives	Major Deliverables	Performance Measures	Benefits			
Objectives specify what the project will achieve. Objectives should be S.M.A.R.T. (Specific, Measurable, Achievable, Relevant and Time-bound).	Deliverables are the tangible things that the project will produce in order to achieve the objectives.	Performance Measures determine whether the objectives have been successfully met.	Benefits describe the organizational advantages obtained by achieving the objectives.			
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• Project will be deemed COMPLETE when all objectives and deliverables have been met.

• Project will be deemed SUCCESSFUL when all performance measures have been achieved.

## 5.0 Alignment with and Impact on RVH Strategic Directions

Describe the project's strategic relevance and supporting strategies. Note: A project will not necessarily touch all five strategic directions.

Alternative Ways to Deliver Care

Health Promotion & Disease Prevention

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Workplace Excellence

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Financial Sustainability

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Collaborate with LHIN & Partners

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6.0 Project Timelines						
Project Start Date:	Pro	ject End Date:				
	High-Level Milestones					
completion dates for high-leve	for the duration of the project by docu l project milestones. <b>Milestones</b> are s of project phases or major deliverable	ignificant project events	Provide preliminary estimates. Use ' <b>Month,</b> <b>Year</b> ' format.			
<b>♦</b>			•			
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7.0 Financials											
Anticipated	d One Time P (Choose <u>A</u> I			To Budg	get	Anticipated On-Going Project Impact To Budget (Choose <u>All</u> that Apply)				o Budget	
Increased cost	10110000 11		(1010)			Increased ongoing cost					
Decreased cost	t					Decreased ongoing cost					
Additional staff			IS					staff to support of		าร	
Anticipated staf	f saving (FTE	)				-		staff saving (FTI	Ξ)		
Cost Neutral						Cost N	eutra	al			
Total Requested	d Funding b	γ Sοι	irce								
		Тс	otal Capi	tal	Total	Operating		Total Exter Funding		-	tal Revenue Seneration
One Time Proje	ct Costs			\$0			\$0		\$0		\$0
<b>On-Going Costs</b>	6			\$0			\$0		\$0		\$0
TOTAL COSTS				\$0			\$0		\$0		\$0
One-Time Proje				Conit			0	poroting		Extorn	al Eunding
Cost Item Desci	ription			Capit Budg				perating udget		Budge	al Funding t
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
TOTALS	Total Or	n-Time	e Cost:			\$0			\$0		\$0
Annual Recurrin	ng (On-Goin	ng) Co	osts	Fisca	I Year Sta	art Date:					
Cost Item Desci	ription			Capit Budg				perating udget		Extern Budge	al Funding t
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
						\$0			\$0		\$0
TOTALS	Total A	nnua	I Cost:			\$0			\$0		\$0
Revenue Genera	ation										
One Time Revenue Budget		\$0	Date:			Ongoir Reven Budge	ue	\$0	Date:		

## 8.0 Core Project Team (s)

The core project team consists of key players who will typically monitor the project throughout its entirety. Identify **who** is needed on the core project team to complete project deliverables and achieve its goals and objectives. Consider what skills, knowledge and experiences will be required for project success.

		Required Involvement		
Role / Project Title	Represented By	Estimated Duration	Estimated Level of Effort	
Provide the project title of each required core project team member.	Indicate the name of the person who is filling this project role	For what time-period is this role required?	FTE level needed during this time period?	
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## 9.0 Support Project Team (s)

Support teams are required throughout the project at different stages. Identify **who** is needed on the support project team to complete project deliverables and achieve its goals and objectives. Consider what skills, knowledge and experiences will be required for project success.

		Required Involvement			
Role	Represented By	Estimated Duration	Estimated Level of Effort		
Provide the project title of each required support project team member	Indicate who is representing title of team member or organization	For what time period is this role required?	FTE level needed during this time period?		
•	•	•	•		
•	•	•	•		
•	•	•	•		
•	•	•	•		
•	•	•	•		

Add Project Name Here

## 10.0 Project Stakeholders

**Stakeholders** are individuals or organizations that have a vested interest in the initiative. They are either affected by, or can have an affect on, the project. Anyone whose interests may be positively or negatively impacted by the project or anyone that may exert influence over the project or its results is considered a project stakeholder. All stakeholders must be identified and managed appropriately. This section should be completed in collaboration with the stakeholders.

Stakeholders	Represented By	Interests & Needs	Management Strategies	Stakeholder Sign Off	Date
Identify your stakeholders. List departments, groups or organizations.	Indicate the name of the person who is representing that stakeholder group. List N/A if stakeholder group does not apply.	Why are they stakeholders? How are they involved or affected? List their interests & needs.	How will the project manage the stakeholder's expectations & attempt to meet their needs and requirements?	Stakeholders Signature acknowledging management strategies provided.	Signature Date
INTERNAL STAKEHOLDERS					
Administration					
RVH Foundation					
Medical Advisory Committee					
Corporate Communications					
Clinical Operations Transition					
- Project Management Office					
Corporate Services					
Business Development					
Clinical Informatics and Applications					
Decision Support					
Finance					
Health Information Management					
- Privacy Officer					

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Stakeholders	Represented By	Interests & Needs	Management Strategies	Stakeholder Sign Off	Date
Identify your stakeholders. List departments, groups or organizations.	partments, groups or person who is representing Ho		How will the project manage the stakeholder's expectations & attempt to meet their needs and requirements?	Stakeholders Signature acknowledging management strategies provided.	Signature Date

## 11.0 Assumptions and Constraints

#### Assumptions

Assumptions are external factors that, at the time of writing the charter, are considered true or real for purposes of planning but not validated (i.e. weather conditions). List the assumptions made to date.

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#### Constraints

Constraints are factors that are outside the control of the project team, that restrict or regulate the project (i.e. project deadlines). List project constraints. Consider time, budget, scope, quality, availability/skills of resources, priorities, etc.

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## 12.0 Dependencies

Projects are rarely completed in isolation from other projects happening within the organization. Often, the project in this charter will be dependent on other projects occurring within the organization, and likewise, there will be other projects that are depending on this project being completed. In this section, list these related projects.

This project is dependant on the following projects:

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The following projects are dependant on this project:

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## 13.0 Project Risks

Consider "what if"... Risks are events that may or may not occur during a project. Document high-level project risks apparent at this point that could either positively or negatively impact the achievement of project goals and objectives if they were to occur. Using the chart below, calculate and indicate the level of risk. Focus on risks that are likely to happen and have significant affect on project success.

Risk	Level of Risk	Risk Response
List risk events that pose threats or opportunities to project.	Indicate Low/ <b>M</b> edium/ <b>H</b> igh	Explain what will be done to avoid, transfer, mitigate or accept the risk.
•	•	•
•	•	•
•	•	•
•	•	•
•	•	•

## LEVEL OF RISK TABLE

	CONSEQUENCE						
LIKELIHOOD	Insignificant	Minor	Significant	Major	Catastrophic		
Certain	LOW	MEDIUM	HIGH	HIGH	HIGH		
Likely	LOW	MEDIUM	MEDIUM	HIGH	HIGH		
Possible	LOW	MEDIUM	MEDIUM	MEDIUM	HIGH		
Unlikely	LOW	LOW	LOW	MEDIUM	MEDIUM		
Improbable/Rare	LOW	LOW	LOW	LOW	MEDIUM		

## 14.0 Project Communications

Identify the **information needs** of the project's steering committee, project sponsor, Project Management Lead, team members, working groups, partners, stakeholders and others. List strategies for ensuring that the right information is provided to the right audience in most suitable and timely manner. Be sure to identify format and frequency of communication between the Project Management Lead and project sponsor regarding project status, performance, risks, issues, etc.

Event	Audience	Information Needs	Format	Frequency	Responsible Party
List the event that triggers a communication requirement.	List recipients of the information.	State what information will be communicated.	Explain method (i.e. e- mails, newsletters, screen-savers etc).	Explain when and how often information will be communicated.	Identify who will provide the information.
•	•	•	•	•	•
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## 15.0 Sign-Off

The Project Charter must be approved & signed-off by the project sponsor before the Planning Phase can be completed. Project Management Lead and champion also sign-off on the charter. Once completed & signed-off, the charter forms the basis for detailed planning and future decision-making. It cannot be modified without securing the sponsor's approval. Any changes to the information contained in the charter must be documented using a formal Project Change Request and the associated process.

## **Executive Sponsor**

Sign-off by the Executive Sponsor signifies that all of the contents of the Project Charter have been read and that there is clear commitment on behalf of the sponsor to provide guidance & support and contribute necessary resources to complete project goals & objectives as outlined in the Charter. By signature, the sponsor endorses this project and commits to support the project team in its aim to achieve the stated goals and objectives. By approving the project charter, the sponsor has understood what will be delivered and is in agreement with performance measures and success factors identified.

Name & Organization	Signature	Date

## **Project Champion**

Sign-off by the Project Champion signifies that assistance will be provided in promoting the project, managing resistance, and driving successful adoption of the project.

Name & Organization

Signature

Date

## **Project Management Lead**

Sign-off by the Project Management Lead signifies that there is clear commitment to adhere to the terms of the charter and ensure that the project proceeds to meet the objectives defined in it.

Name & Organization

Signature

Date

16.0 Revision History									
Any changes to the charter should be documented below and reviewed by applicable Stakeholders.									
Revision	Date	Status	Author	Reviewed By	Summary of Changes				