



# Stage 1 Business Analysis

Department of Technology, SIMM 19A, Revision 7/1/2015

## 1.1 General Information

Agency or State Entity Name:

Select...

Organization Code:

Proposal Name:

Proposal Description:

Proposed Start Date:

Delegated Cost Threshold (Optional):

Over  Under

Department of Technology Project Number:

## 1.2 Submittal Information

Contact Information:

Contact First Name:

Contact Last Name:

Contact Email:

Contact Phone Number:

Submission Date:

Submission Type:

- New Submission  Updated Submission (Pre-Approval)  
 Updated Submission (Post-Approval)  Withdraw Submission

Project Approval Executive Transmittal:

 File Attachment

## 1.3 Preliminary Assessment

1.3.1 Reportability Assessment

Yes No

1. Does the Agency/state entity anticipate requesting a budget action to support this proposal?
2. Does the Agency/state entity anticipate the estimated total development and acquisition cost to exceed the Department of Technology's established Agency/state entity delegated cost threshold **and** the proposal does not meet the criteria of a desktop and mobile computing commodity expenditure?
3. Does this proposal involve a new system development or acquisition specifically required by legislative mandate **or** is subject to special legislative reporting or review as specified in budget control language or other legislation?

### Anticipated Reportability

Is this proposal anticipated to be reportable?

### Planned Reporting Exemption

Does the Agency/state entity anticipate seeking an exemption from project reporting? (Answer only if Anticipated Reportability above is "Yes.")

### 1.3.2 Impact Assessment

Yes No

1. Has the funding source(s) been identified for this proposal?

If "Yes," select applicable funding source(s) and enter the fund availability date.

If funding source is "Other Funds," specify below:

**FUND SOURCE**  
Mark all that apply

**FUND AVAILABILITY DATE**

General Fund

Special Fund

Federal Fund

Reimbursements

Bond Fund

Other Funds

2. Will the State possibly incur a financial sanction or penalty if this proposal is not implemented? If "Yes," provide details in Section 1.9 Business Problem or Opportunity Summary.

3. Is this proposal anticipated to have high public visibility? If "Yes," provide details in Section 1.9 Business Problem or Opportunity Summary.

4. On a scale of 1 to 3 (1 = None, 2 = Partially, 3 = Fully), indicate how well the current business processes are documented, communicated and available for review. Select...

## 1.4 Business Sponsor and Key Stakeholders

### Executive Sponsors

Title	First Name	Last Name	Business Program Area
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

## Business Owners

Title	First Name	Last Name	Business Program Area

## Key Stakeholders

Title	First Name	Last Name	Business Program Area/Group	External
				<input type="checkbox"/>

## 1.5 Business Driver(s)

Mark all that apply

### Financial Benefit:

- Increased Revenues
- Cost Savings
- Cost Avoidance
- Cost Recovery

### Mandate(s):

- State
- Federal

### Improvements:

- Better Services to Citizens
- Efficiencies to Program Operations
- Improved Health and/or Human Safety
- Technology Refresh

### Security:

- Improved Information Security
- Improved Business Continuity
- Improved Technology Recovery

## 1.6 Statutes or Legislation

### Statutes or Legislation:

- New Statutes
- Potential Legislation
- Changes to Existing Legislation
- Not Applicable

### Bill Number:

### Legal Reference:

### Additional Information:

## 1.7 Program Background and Context

## 1.8 Strategic Business Alignment

Strategic Business Goals	Alignment

Strategic Plan Last Updated

## 1.9 Business Problem or Opportunity Summary

## 1.10 Business Problem or Opportunity Objectives Table

### ID Problems or Opportunities

1

Obj #	Objective

Metric	Baseline	Target	Measurement Method

## 1.11 Business and Stakeholder Capacity

**1.11.1 Business Program Priorities** **Yes** **No**

Does this proposal share resources (state staff, vendors, consultants or financial) with other business program priorities within the Agency/state entity ?

**1.11.2 External Stakeholder Involvement**

**1.11.3 New or Changes to Business Processes** **Yes** **No**

Does the Agency/state anticipate this proposal will result in the creation of new business processes?

Does the Agency/state entity anticipate changes to existing business process?

## 1.12 Organizational Readiness

**1.12.1 Governance Structure** **Yes** **No**

Does the Agency/state entity have an established governance structure for combined business

and IT decision making, including information security and privacy?

### 1.12.2 Leadership Participation

Identify the levels of leadership that are aware of and engaged in addressing the business problem (s)/opportunity(ies) identified in this proposal (Check all that apply):

- Executive
- Senior Management Business/Program
- Mid-level Management Business/Program
- Senior Management IT
- Mid-level Management IT
- Enterprise Architect

### 1.12.3 Resource Capability/Skills/Knowledge for Stage2 Alternatives Analysis Yes No

Does the Agency/state entity anticipate requesting additional resources, through a budget request, to further study this proposal and/or perform procurement analysis?

Of the Agency/state entity resources identified to perform Stage2 Alternatives Analysis for this proposal, enter the number of staff who have had experience with planning projects of similar nature.

### 1.12.4 Training and Organizational Change Management Yes No

With respect to the magnitude of this proposal, does the Agency/state entity have resources, processes, and methodologies in place to provide training and organizational change management services?

Does this proposal affect business program staff located in multiple geographical locations?    
If 'Yes' specify the city, state, number of locations and approximate staff in each location:

City	State	Number of Locations	Approximate number of staff
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### 1.12.5 Enterprise Architecture Yes No

Does the Agency/state entity have a documented target (or future state) enterprise architecture that provides the overall business and IT context for this proposal?

### 1.12.6 Project Management

Project Management Risk Score:

### 1.12.7 Data Management

**Yes**   **No**

1. Does the Agency/state entity have an established data governance body with well-defined roles and responsibilities to support data governance activities?
2. Does the Agency/state entity have data governance policies (e.g., data policies, data standards, etc.) formally defined, documented and implemented?
3. Does the Agency/state entity have data security policies, standards, controls, and procedures formally defined, documented and implemented?

## Department of Technology Use Only

Original "New Submission" Date

Form Received Date

Form Accepted Date

Form Status

Select...

Form Status Date

Form Disposition

Select...

Form Disposition Date