**Overall Evaluation Report**

**for Information Technology (IT) Project**

**Dedicated Fund (DF)**

1. Name of the NGO

|  |
| --- |
| Enter Name of the NGO |

1. Name of the IT Project *[Please state the original name and the revised name, if applicable]*

|  |
| --- |
| Enter Name of the IT Project |

1. Approved IT Project

|  |  |  |
| --- | --- | --- |
|  | Original | Revised (if applicable) |
| Approved Amount | Original Approved Amount  | Revised Approved Amount  |
| Date of approval | Original Approval Date | Revised Approval Date |

1. Actual Project Expenditure

|  |  |
| --- | --- |
| HK$ : | Enter Actual Project Expenditure |

1. Project Duration

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Stage****[[1]](#footnote-1)**  | **Planned Start Date (***mm/yyyy***)** | **Planned End Date (***mm/yyyy***)** | **Actual Start Date****(***mm/yyyy***)** | **Actual End Date****(***mm/yyyy***)** | **Reasons for Deviation** |
| Tendering | Start Date | End Date | Start Date | End Date | Enter Reasons |
| Project Initiation | Start Date | End Date | Start Date | End Date | Enter Reasons |
| System Analysis and Design | Start Date | End Date | Start Date | End Date | Enter Reasons |
| System Development | Start Date | End Date | Start Date | End Date | Enter Reasons |
| System Integration Test / User Acceptance Test | Start Date | End Date | Start Date | End Date | Enter Reasons |
| Data Conversion | Start Date | End Date | Start Date | End Date | Enter Reasons |
| System Installation | Start Date | End Date | Start Date | End Date | Enter Reasons |
| Security Risk Assessment and Audit | Start Date | End Date | Start Date | End Date | Enter Reasons |
| Privacy Impact Assessment | Start Date | End Date | Start Date | End Date | Enter Reasons |
| Production Rollout | Start Date | End Date | Start Date | End Date | Enter Reasons |
| System Nursing | Start Date | End Date | Start Date | End Date | Enter Reasons |
|  |  |  |  |  |  |
| **Total Duration for Completion of the Project[[2]](#footnote-2)** |

|  |  |
| --- | --- |
| Enter No. of Month(s) | Months |

 |

|  |  |
| --- | --- |
| Enter No. of Month(s) | Months |

 |  |
| System Maintenance | Start Date | End Date | Start Date | End Date | Enter Reasons |
|  |  |  |  |  |  |
| **Total Duration of the Project (include System Maintenance)** |

|  |  |
| --- | --- |
| Enter No. of Month(s) | Months[[3]](#footnote-3) |

 |

|  |  |
| --- | --- |
| Enter No. of Month(s) | Months |

 |  |

1. Has your Agency changed the implementation schedule?

|  |  |
| --- | --- |
| [ ] No | [ ] Yes *[Please provide the revised schedule below]* |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Revised Schedule: | From | Start Date | (mm/yyyy) | to | End Date | (mm/yyyy) |

|  |  |
| --- | --- |
| 1. Date of Interim Report submitted:
 | Enter Date |
| Dates of Further Interim Report(s) submitted (if any): | Enter Date(s) |

1. Project Deliverables *[Please “✓” as appropriate and provide information as applicable]*

|  |  |
| --- | --- |
| **Project Deliverable** | **Description** |
| [ ]  Project Initiation Document | Enter Description |
| [ ]  Technical Document(s)(e.g. System Analysis and Design Report, Program Specification) | Enter Description |
| [ ]  Other IT Project Document(s)(e.g. User Acceptance Test Plan and Report, Backup and Recovery Procedure) | Enter Description |
| [ ]  Web Accessibility Compliance(For website and web-based application projects) | Enter Description |
| [ ]  System Security Measures/Manual(s)(e.g. Security Risk Assessment and Audit Report) | Enter Description |
| [ ]  Privacy Impact Assessment(e.g. Privacy Impact Assessment and Privacy Compliance Audit Report) | Enter Description |
| [ ]  User Training(s) | Enter Description |
| [ ]  User / Operation Manual(s) | Enter Description |
| [ ]  Administration Manual(s) | Enter Description |

1. Project Benefits *[Please “✓” as appropriate and provide information as applicable]*

|  |  |
| --- | --- |
| **Project Benefits** | **Description** |
| [ ]  Annual Savings in Staff Effort | Enter Description |
| [ ]  Other Savings / Additional Revenue | Enter Description |
| [ ]  Improvement in Operational Efficiency | Enter Description |
| [ ]  Improvement in Service Delivery | Enter Description |
| [ ]  Improvement in Corporate Image | Enter Description |
| [ ]  Other Intangible Benefits (e.g. facilitate data sharing among units) | Enter Description |

1. Difficulties Encountered *[Please “✓” as appropriate and provide information as applicable]*

|  |  |
| --- | --- |
| **Difficulties Encountered** | **Description and Solutions** |
| [ ]  Tendering / Tenders vetting  | Enter Description / Solutions |
| [ ]  Users’ Requirements | Enter Description / Solutions |
| [ ]  Contractor Management | Enter Description / Solutions |
| [ ]  Staff Turnover / Manpower | Enter Description / Solutions |
| [ ]  Delay of Project  (Please highlight reasons of delay)  | Enter Description / Solutions |
| [ ]  Other Difficulties/ Issues

|  |  |  |
| --- | --- | --- |
| (Please specify | Other Difficulties | ) |

 | Enter Description / Solutions |

1. Employment of IT Professionals in overseeing the implementation of the Project

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  No | [ ]  Yes | *(Please specify:* | Enter the description | *)* |

1. Lessons / Experience Learnt from the Project



1. Other Remarks (if any)



|  |  |  |
| --- | --- | --- |
|  | Prepared by: |  |
|  |
|  |
|  |  | (Enter the name of the person) |
|  | Post: | Enter Post |
|  | Tel. No.: | Enter Tel. No. |
|  | Date: | Date |
|  | Endorsed by: |  |
|  |  | (Enter the name of the person) |
|  | Post: | NGO / Division Head |
|  | Tel. No.: | Enter Tel. No. |
|  | Date: | Date |

The NGO is required to send this **Overall Evaluation Report** to the Information Systems and Technology Branch (ISTB) of the Social Welfare Department. Soft copy can be sent to sist4@swd.gov.hk.

1. Please tally with the Implementation Plan at Section 2.1(g) of the Application Form for the IT Project (i.e. Appendix A2). [↑](#footnote-ref-1)
2. From start date of the project to end date of system nursing. [↑](#footnote-ref-2)
3. Please tally with the Application Form for the IT Project (i.e. Appendix A2), Section 1.1 and Section 2.1(g) [↑](#footnote-ref-3)