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| **Initiative Name**  |
|   |  |
| **TRCA Staff Lead**  |
|  |  |
| **Business Unit**  |
|  |  |
| **Please Identify if your initiative is a project or program**  |
|  |  |
| **Intended Start Year**  |
|   |  |
| **Intended End Year (if applicable)**  |
|   |  |
| **Purpose** Define the business rational for undertaking the proposed initiative. |
|   |  |
| **Scope** Provide a high-level description of the features and functions that characterize the product, service, or result that is to be delivered by the initiative. |
|  |  |
| **TRCA Strategy Alignment** Select the top 1-2 TRCA strategic priorities and the related Desired Outcomes from the TRCA Strategic Plan that this proposed initiative supports or enables. |

**Risk**:

Indicate on scale of 0-4 how the proposed initiative will address the following risks

4 – Addresses the risk;

3 – Addresses most of the risk with minor gaps;

2 – Addresses some of the risk with moderate gaps;

1 – Addresses a portion of the risk with significant gaps;

0 – Does not address the risk

Please ensure you provide a short explanation of how the initiative addresses the identified risks. If the proposed initiative does not address the risk, indicate the field with 0.

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| **Hazard Risk** Initiative will significantly reduce risk to the health and safety of the population and protect properly from damage. Project will decrease negative impacts on the environment |
|  |  |
| **Financial Risk** The initiative will reduce potential financial loss or financial risk to the organization. |
|  |  |
| **Strategic Risk** Initiative will mitigate system wide risk that are perceived to be outside the control of the organization, such as demographic, political, economic or environmental exposures. |
|   |  |
| **Operational Risk**Initiative will mitigate risks arising from human resources, contractors, processes, systems or external events.  |
|  |  |
| **Why is TRCA the appropriate provider of this initiative?** Chose all that apply:* Policy and Governance
* Contractual Obligation
* TRCA Corporate Service
* Municipal Request
* TRCA Liability
* Valuable/Rare TRCA Capability
* TRCA Asset(s)
* Legislated Mandate
* Other (please state why)
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|   |  |
| **Funding Formula** OperatingCapitalFoundationSpecial Project / Other |
|   |  |
| **Does the funding strategy of this initiative include non-funding partnerships?**  |
|   |  |
| **Will this initiative generate revenues or reduce expenditures for the organization?**  |
|   |  |
|  **If Yes, please provide further details**  |
|   |  |
| **Do you have other potential funding sources?**  |
|   |  |
|  **If Yes, please provide further details**  |
|   |  |
| **Budget**  |
|   |  |
| **Total Anticipated Budget** Provide the total anticipated expenditures for the initiative.Provide the total anticipated expenditures broken out by phase as outlined below:Expenditures to consider include salaries and wages; consulting services; materials and supplies; operations and maintenance; and any other anticipated costs. |
|   |  |
| **Initiation**  |
|   |  |
| **Planning**  |
|   |  |
| **Execution**  |
|   |  |
| **Monitoring**  |
|   |  |
| **Closeout**  |
|   |  |
| **Can this project be phased?**  |
|   |  |
| **Are there barriers to exiting this initiative?** Examples can be both internal and external. |
|   |  |
| **What is your exit strategy?** Please provide a brief description of how the initiative would be wound down and discontinued if it were approved. Key items could include what functions could be delegated to other parts of the TRCA or other organizations, the maintenance of dispersal of existing assets, and partner or stakeholder issues that would require management. |
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