**PLEASE DOWNLOAD AND SAVE THIS TEMPLATE BEFORE ADDING YOUR INFORMATION**

**Prepared by: Program name  
   
Version date: Month day year  
Version: 0.0**

# 

# Contacts

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| --- | --- |
| Project contact | [Insert project contact name] [Title]  [Email address]; [Phone number] |
| Program, service or department |  |
| Project type | New website or microsite  Replacement website or microsite  Major change to existing website or microsite |
| Version | Use the format #.#  Change the first number for major changes Change the second number for minor revisions |
| Status |  |

# Before you begin

Before completing this approval request, please [review the information on POD](https://pod.phsa.ca/workplace-resources/websites-pod-social) about PHSA’s websites and then follow these steps:

1. Review the questions in this document and consult with your [program communications representative](https://pod.phsa.ca/our-phsa/browse-by-department/Pages/Communications.aspx#toc-communications-contacts) from PHSA Communications & Engagement about how this initiative fits with your team or department’s broader communications strategies. If you are unsure who your representative is and/or your program is not listed, please contact [phsacomm@phsa.ca](mailto:phsacomm@phsa.ca) to find out who you should contact.
2. Your communications representative will consult with the web strategy specialists, ask any clarifying questions and offer their advice on whether the request should proceed, based on its likelihood to receive approval and whether or not it fits within PHSA’s supported channels.
3. If you decide to proceed with your request, complete the form below and submit it to [webhelp@phsa.ca](mailto:webhelp@phsa.ca), copying your communication representative.
4. PHSA’s Vice President, Communications & Engagement will review your request, and you will be advised whether your request has been approved. At that stage, we’ll let you know about the next steps.

# Section 1: Strategy, budget and & requirements

Use the following sections to identify the need for a new website, or major changes to an existing site, for a program, department or service of PHSA.

## STRATEGIC ENVIRONMENT

### Operational need

Identify the operational need in the form of a concise, well-structure statement that addresses the problem or opportunity. This statement should be no more than one or two sentences.

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### Drivers for change

Identify the internal and external drivers that have triggered the need for the proposed new website or major changes to an existing site.

*Examples of external factors:*

* *social factors; political reasons; economic factors; technological issues.*

*Examples of internal factors:*

* *resources; expertise; operational requirements; legal requirements.*

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### Additional considerations

Identify additional considerations such as hard deadline or pre-determined budget.

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## STRATEGIC FIT

Describe how the operational need for the proposed website or major changes to an existing site fits within the service area’s broader strategic context and contributes to its goals and objectives.

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### Audiences

Detail the audiences you are hoping to reach through this project, along with evidence that supports the audiences’ anticipated responsiveness to the proposed website, or major changes to an existing site.

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### Strategic outcomes

Describe the expected results or benefits (high level) that the website plans to achieve once implemented.

*Examples include:*

* *Improved audience (user) experience through reorganization of content*
* *Complement to patient care through useful, findable, relevant content*
* *Improved accessibility for equity-deserving audiences*
* *Support for communications campaigns through relevant “evergreen” content*

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## FUNDING

### Sources of funding

What funding do you have access to for the development and ongoing operation of this website?

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## OPERATIONAL REQUIREMENTS

### Prioritized requirements (high level)

Describe or list the key requirements needed to fully address the business need.

*Examples:*

* *The need to integrate and/or host video, social media feeds and RSS.*

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# Section 2: Management & capacity

Complete the following sections to describe how the website will be managed.



## GOVERNANCE & OVERSIGHT

Describe how the proposed website will fit into the department, program or service’s broader governance and oversight structure, including the involvement of communications lead(s).

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### Resources

Identify the staff available to prepare content prior to launch, and support and maintain the website after launch, along with the percentage of their job that will be dedicated to this initiative.

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### Managing content after launch

What is your plan to maintain the quality of your site (content and organization) after launch? Outline how, from where and by whom content for the website will be created, edited, approved, published and maintained/reviewed once online.

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### Key performance indicators (KPIs)

Identify key performance targets for how the website will add value to your program or service. Outline how you plan to measure and report on your KPIs.

*Examples of KPIs:*

* *visitor traffic; reduction in phone requests; number of downloads; increased awareness.*

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# Section 3: Next steps

## POLICY REVIEW

Prior to submitting a request for approval to Communications, program areas must read the [Digital Communications Channels policy](http://shop.healthcarebc.ca/phsa/PHSAPOD/Communications/C-99-11-20105.pdf). By signing and submitting a request for approval, you are certifying that you have read and will abide by the policy.

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| --- | --- | --- |
| ***Have you read PHSA’s Digital Communications Channels policy?*** | Yes: \_\_\_ | No: \_\_\_ |

## Send completed and signed approval request to Communications

Please send the completed approval request to [webhelp@phsa.ca](mailto:webhelp@phsa.ca) (if it’s related to a website or microsite) copying the [communications representative](https://pod.phsa.ca/our-phsa/browse-by-department/Pages/Communications.aspx) for your program or service.

# Signatures

By signing this approval request, I certify that I have read the [Digital Communications Channels policy.](http://shop.healthcarebc.ca/phsa/PHSAPOD/Communications/C-99-11-20105.pdf)

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Executive project sponsor/director responsible Date

Full name

Title

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Project sponsor/program lead or manager Date

Full name

Title

This request is approved to proceed.

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Vice president, communications & engagement Date

Full name: Laurie Dawkins