

Te Tātai Atawhai Projects Independent Quality Assurance Review

for

Department of Conservation (DOC)

December 2022
Final
IN CONFIDENCE

RELEASE

Table of Contents

Executive Summary	4
Detailed Findings & Recommendations	
Project governance and management	
Scope management	8
Schedule management	9
Change management	9
Resource management	11
Resource management	12
Benefits management	12
Risks and issues management	12
Quality management	13
Lessons and Recommendations	
Document Signoff	20
Management Comment	20
Next Steps	
Signoff	20
Appendix A — Terms of Reference & Approach	21
Appendix B — What the ratings mean	25
Document Control	26
PELE ASED UNDE	

INDEPENDENT QUALITY ASSURANCE NZ LIMITED

www.iqanz.com

Lead Reviewer: 9(2)(a)

Peer Review: 9(2)(a)

This report summarises our findings and observations of the projects, together with our recommendations to increase the likelihood of success of future project's.

IQANZ prepared this report for the SRO, and for broader distribution within the Department of Conservation as appropriate. It is not intended for release to any external party without our prior approval.

We completed the discovery and engagement work between 14 and 24 November 2022. The findings and observations outlined in this report rely on the information we gathered at PELEASED UNDER THE OFFICIAL INFO that time.

The review team thanks the staff involved in this review for their input and cooperation.

Executive Summary

Overview and objectives

Te Tātai Atawhai (TTA) is the Project to upgrade the Department of Conservation (DOC) Financial Management Information System to the newest version 9(2)(b)(ii). The work on the upgrade commenced in October 2020 and a system go-live was performed on 6 July 2022. The combined budget for the work was \$21.5 million

To assist in identifying the learnings from the project delivery, DOC has requested IQANZ conduct an Independent Quality Assurance (IQA) review of the TTA project. In agreement with the current sponsor and DOC EPMO, this IQA focused on the project work undertaken up to the go-live in July 2022 and has taken a post implementation view of the work up to that point. Reference to the 'Project' in this IQA refers to the work completed in this first phase.

The key objectives of the IQA were to:

- Review the overall project governance and management environment (roles, responsibilities, capability, capacity, approach, processes, standards, and controls) in place for the project against public sector, DOC and standard best practice guidelines.
- Identify key findings (risks, strengths, learnings, and improvement opportunities) and present pragmatic recommendations to maximise the project's success within the agreed timeframes.

Appendix A includes the Terms of Reference for our engagement, with detailed scope information, a list of the documents we reviewed, and the people we spoke with.

Summary

There were many management failings in the delivery of this project. The project was not business ready at go live, which has caused significant business disruption and increased operational risk. The decision to go live without performing user acceptance testing (UAT) is questionable and a significant departure from industry standard practice for a project of this nature. Whilst a technical system was deployed in July 'on time and on budget', the system was not fully tested and training was not completed.

The majority of the Project leadership and Project Team working at DOC during the go-live in July 2022 have left the organisation. During the IQA we were able to interview a wide range of individuals associated with the Project, but the majority were no longer engaged at DOC.

From our interviews, we noticed that there were conflicting opinions on many topic areas. Unfortunately, many of these opinions could not be supported with documentation or verified by staff who were still engaged at DOC. Instead, we've had to take an objective view of the information collected to identify areas where lessons can be identified to provide recommendations that will support future initiatives at DOC.

Shortcomings of the Project delivery have been recognised, and to the credit of the current Sponsor and leadership, several review sessions have been undertaken to capture the observations and lessons learned. These sessions produced artefacts that demonstrate frank and honest discussions and identified valuable lessons learned. The information from these reviews exceeds the depth that this IQA can cover, and rather than repeat the information already captured, these documents are referenced here:



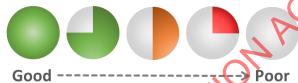
- 1. Review of Phase 1 go live DOC-7125963
- 2. Review of Operations Hot spots DOC-7125758
- 3. Update Te Tātai Atawhai reviews DOC-7126309
- 4. Reflections on TTA internal comms to date DOC-71200273

ARTHE OFFICIAL INFORMATION ACT AND THE OFFICIAL INFORMATION ACT AN The current DOC team and management should be commended for undertaking these reviews. The

Detailed Findings & Recommendations

We have rated each of the review components using the rating guide to identify the strengths and weaknesses of the project. These ratings consider the surrounding context of the project and any work in progress.

Appendix B includes a full definition of the assessment ratings



Project governance and management

Rating



Not appropriate or fit for purpose. Significant material improvements are needed.

Findings and observations

Governance:

- The governance structure changed three times over the life of the Project:
 - The TOR of the first Governance Group described a group that was chaired by the Sponsor and supported by the SRO, senior users, and other business representatives. This evolved into a large ineffective group that provided limited governance to the Project. The Group's ineffectiveness was recognised by senior leaders –the Group was disbanded, and formal governance ceased.
 - A 'Directors Advisory Group' was then initiated. This group provided advice to the Project for approx. six months. During this period there was no formal governance group steering the Project.
 - o In June 2022 the governance group was updated. A Change Request explains that the TTA Sponsor was changed to the DOC Director General (DG), and the SRO was replaced. Whilst the change was documented, there is no Terms of Reference outlining the roles and responsibilities of the group. It is concerning that the previous Sponsor left DOC three months prior to this change, and that the change was made three weeks prior to the Project go-live. The minutes of the meetings for the two months following the change show that the Sponsor did not attend any meetings, and that meetings were chaired by a member who was removed from the Governance Group in the Change Request.

RELEASEDUNDE

- The recent meeting minutes (last two months) show a different member chairing the meetings. A new TOR should be documented that reflects the makeup of the current Governance Group.
- For such a high priority initiative the Sponsor and SLT needed to be fully engaged to support, govern, and champion the Project. However, the visibility of the Sponsor and the leadership of the SRO up to the go live was insufficient. Reasons captured by the IQA for the poor governance performance included excessive leader workload, leader inexperience to fulfil roles assigned to them, personal agendas diverting the priorities of the governance group, and other activities at DOC distracting leaders from fulfilling their responsibilities (e.g., an organisation restructure).
- The work was initially delivered in two related projects: the Finance and Plant Maintenance (Core) Upgrade and the Enhancements Project. These two projects were closely intertwined and were eventually merged into one delivery. The scope of delivery included significant business and technical change and the structure of the delivery would have benefited from being set-up as a program of work with two conjoined projects: one for the technical delivery and one for business readiness delivery. Project managers and team members with the suitable strengths and experience could then be assigned to the appropriate project.

Management and reporting:

ZELEASED UN

- From May 2022 the individual project status reports (PSR) that were provided to the Steerco were combined into a single status report.
 Although the reports contained most of the project reporting areas expected, they appear light in detail. It is understood that a verbal update was provided by the Project Manager to support the PSR. The meeting frequency was typically monthly with additional meetings scheduled around the go live period to support Project decisions.
- The method used to apply the RAG status was unclear, although the commentary in the reports suggest the statuses were appropriate. It is noted that the overall status moved from Red to Amber the week before the go-live on 2 July 2022; despite the improved rating, it still illustrates a project that was not well positioned for go live.
- Some of the standard project management artefacts that we expect to see for this type of project did not exist. These documents include a Project Management Plan (PMP), Test Strategy, Test Exit Report, Go-Live Decision Paper. For example, the PMP is a foundational delivery documentation that we expect to see for any project. It is an approved document used to guide both project execution and project control. The evidence of an approved PMP indicates that the key project areas have been considered and the Sponsor has acknowledged that the Project is well positioned to commence. The DOC EPMO provides guidelines that identify the artefacts that should be created. These should have been followed to ensure that key artefacts were created and approved by the Governance Group.

- There are multiple factors to consider when making a go-live decision however these were not documented by the Project. We noted a range of quality and business change management deliverables which were not completed before go-live, for example:
 - Go-live went ahead with incomplete testing.
 - There was incomplete training.
 - An end-to-end trial data migration had not been completed.

The scope of this IQA does not include a review of the go-live decision, however a Go-Live Decision Paper would have captured the relevant decision factors including the position of the Project at that time, the associated risks and potential business impact of going live with incomplete deliverables, and a formal record of the approval made by the SLT.

- There are anecdotal suggestions of a disconnect between the business and the Project and that this impacted the system build and acceptance of the system. Design decisions were made that did not include user input and this created an impression that the project refused to listen to the business. Contrary opinions suggested that the Project was not permitted to engage with business representatives. This should be investigated by the current Governance Group and the situation addressed if a disconnect between the current project work and the business is identified.
- There is currently no plan or date to close the Project. The current delivery Team will need to ensure that the necessary project closure activities are completed. This includes handing over operational activities to business as usual (BAU) support, delegating benefit realisation plans to the appropriate business owners, and preparing a Project Close Report for approval by the Governance Group.

Scope management

Rating



Development needed. Material improvement opportunities exist.

Findings and observations

- The high-level scope and deliverables of the Projects were well defined
 in the business cases. It was identified early in the project lifecycle that
 delivering the overall scope with the time and resource available
 would be ambitious. At some point in the project, the team agreed to
 deliver a Minimum Viable Product (MVP) which was a sensible tactic.
 However, there is no documentation or decision paper provided to the
 IQA outlining this decision or defining the scope that was agreed in the
 MVP.
- There appears to have been a process for managing changes with the main vendors although this process is not documented in a Change Management Plan (or PMP).



- There is no evidence of a process to baseline the project delivery scope, timeline, and key milestones. Typically, these items are agreed and baselined with the Governance Group, and any deviation from baseline should follow a formal change control process.
- There was no Decision Register maintained that captured significant Governance Group or Project decisions. It was unclear if decisions were made outside the context of the Project objectives or that they didn't support the direction of the Project.

Schedule management

Rating



Development needed. Material improvement opportunities exist.

Findings and observations

- A high-level project gantt chart, light on detail, was provided to the IQA. Opinions of those interviewed from the Project Team stated that a detailed schedule was never shared with the Team. Members of the Project Team expressed concerns about the lack of clear milestones for the project and there lacked visibility of progress against deadlines and/or whether they were slipping. The later PSRs around the go-live period did include milestones however it was unknown what schedule or baseline these were associated with.
- In the absence of a detailed schedule the IQA was unable to evaluate the suitability of the Project's approach to schedule management.
- In addition, the PSR's contained no project dependencies, which is typically included to illustrate wider business influences on the project and inform the Governance Group of their presence.

Change management

Rating



Development needed. Material improvement opportunities exist.

Findings and observations

Communications:

- DOC typically uses a 'leader led' communication strategy. This did not work effectively to reach all the affected users and deliver the messages required for the Project.
- An examination and agreement of the type and tone of messaging was required. There was a perceived reluctance for the Project to communicate honestly on where things are at, preferring to focus only on positive messages.

- Communications would have benefited from a better balance of messaging and use of plain language. Communications that included 'technical jargon' was called out as an issue as this resulted in confusion amongst users, and leaders felt unable to pass on messages as they were ill-equipped to explain if questions were asked by their staff.
- The pathway to get communications approved was cumbersome at times. This was exacerbated by the workload on the project SME's who needed to contribute and/or review the communications.
- DOC have undertaken a review of the TTA internal communications and produced a paper that reviews the communications and provides insightful recommendations. This review was thorough and the IQA was unable to uncover any additional observations to add to the paper. The paper is referenced above.

Training

ELEASEDUR

- The initial approach was to utilise e-learning modules to deliver training. This did not work well and did not effectively prepare the organisation for the significant changes presented by the Project. The e-learning modules were mainly limited to the technical use of the application and did not reflect the wider business and user context. The limitations of the e-learning modules were identified and inperson training sessions were organised. These were effective but occurred 'too late' to make a significant improvement to the broader learning experience and user readiness at go live.
- The system went live without UAT being performed. This is a significant departure from industry standard practice for a project of this nature. DAT is typically the process that refines and polishes the user interface and confirms the processes that users follow to perform their day to-day activities. Training artefacts are usually created and/or finalised from the UAT activities as they confirm the final system processes that will be deployed at go-live. As the system went live without UAT being completed (and therefore before training material was completed), the quality of the content of the training artefacts provided prior to go-live was negatively affected. It was noted that many eLearning modules were not available at go-live.
- The training, and the system in general, has proven to be complicated for some staff that aren't equipped with a high level of IT literacy. An alternative training plan for these staff would have been beneficial.
- There was no training environment provided within the system.
 Typically, a separate training environment is established, which enables training data and training scenarios to be set-up. This provides an environment that can be easily refreshed (from a training backup) to provide clean training data, and also ensures that training activities do not clash with testing activities.
- DOC have reviewed of the TTA training activities and produced a paper that provides insightful recommendations. This review was thorough and the IQA has not uncovered any additional observations to add to the paper. The paper is referenced above.

Business Readiness

- One of the impacts of the decision to go live without UAT meant that super users were not brought up to speed and this impacted training delivery and other change activities.
- There was resistance to change at DOC. This was not helped by the communication delivery and the limited support of senior leaders who had constrained capacity. The Project occurred at the same time as other transformational change and factors such as the Organisation Reset, general budget constraints, and the impacts of COVID hindered business readiness activities.
- The Project go live did not land well, the business was not prepared and this has caused significant business disruption and increased operational risk.
- DOC have undertaken a review of the TTA business readiness activities and produced a paper that provides insightful recommendations. This review was thorough and the IQA has not uncovered any additional observations to add to the paper. The paper is referenced above.

Resource management

Rating

ELEASED



Mostly appropriate and fit for purpose. Minor improvement opportunities exist.

Findings and observations

- A strong one-team culture was developed by the Project Team consisting of staff from DOC, 9(2)(b)(ii), and the other vendor partners. This developed a strong virtual team (Wellington based) that trusted each other and worked well together regardless of location or organisation.
- There was a shortage of knowledgeable subject matter experts (SME's) available to the Project and this created bottlenecks in several areas. Other pressures across the Department meant that project resources couldn't be fully removed from BAU activities. This further increased the high workloads of some of the Project SMEs. The demand on SME's reduced the opportunity for them to transfer knowledge to staff and build depth within the team, and also affected turn-around times for key business decisions.
- The lengthy timeframe of the Project and demand on the team saw some members working excessive hours, and this introduced concerns about staff welfare. Future projects will need to ensure that adequate pastoral care is provided so that staff burnout does not occur.
- The project lifecycle included the COVID pandemic, which increased the unavailability of staff because of the lockdown requirements and vaccine mandates. This Project appears to have negotiated the restrictions sensibly and managed the period effectively.



Financial management

Rating



Appropriate and fit for purpose. No material improvement opportunities exist.

Findings and observations

- Programme finances were captured and tracked through a financial forecast spreadsheet maintained by the Project Manager. Opinion was consistent that the financial information reported were considered accurate. Nothing from our fieldwork suggests this view is incorrect.
- A financial performance summary was provided to the Governance Group through the Project Status Report (PSR).

Benefits management

Rating



Mostly appropriate and fit for purpose. Minor improvement opportunities exist.

Findings and observations

- The benefits of the projects were outlined in the Business Cases.
 Benefits realisation is supported by a Benefits Realisation Plan for each
 Project that outlines the objectives and the Benefit Owner. The plan
 also describes the process to obtain baseline measurements of the
 benefit, target values and realisation date, and the realisation plan for
 each benefit.
- After the projects close, attention will be required to ensure that the Benefit Owners continue to execute the Realisation Plan.
- The current Benefits Realisation Plan contains Benefit Owners who are no longer employed at DOC. The plans need to be updated to reflect the current organisational structure and the benefit owner.

Risks and issues management

Rating



Mostly appropriate and fit for purpose. Minor improvement opportunities exist.

Findings and observations

 There appears to have been a level of awareness of the risks associated with the Project. The TTA Project Register spreadsheet was provided to the IQA, this shows evidence of risks being reviewed and updated. The high priority risks and issues (with mitigations) were provided in the PSR for the Governance Group to review and discuss.

The DOC risk matrix methodology was applied to rating and classifying the risk response.

 Narratives from remaining members of the Team stated that formal risk workshops were not regularly held, nor were joint risk workshops scheduled with vendors. Regular discussions and/or workshops should have been scheduled and registers updated to ensure that the information is kept current.

100g

Quality management

Rating

ELEASEDUR



Not appropriate or fit for purpose. Significant material improvements are needed.

Findings and observations

- The project had a collaborative testing approach which saw DOC staff supplemented with a testing partner who together worked closely with the system vendor. There was no Test Strategy or Test Exit Report provided to the IQA and it is assumed that they were not created.
 Some test execution reports were provided to the IQA and these appear complete.
- The system went live without UAT being performed. The system therefore went live with testing incomplete. There are also anecdotes that code has been released into production at go live that has never been reviewed or tested and that this situation still exists. Examples need to be identified, a risk assessment completed, and a plan created to test the functionality.
- The decision to omit UAT was a lost opportunity for early identification of issues. Training artefacts are typically created from UAT activities (and should be delivered before go-live), these had to be produced on the live system.

Lessons and Recommendations

Project governance and management recommendations

#	Recommendation	Rationale
1.1	Ensure that the make-up of the Governance Group is suitable.	Ensure that the make-up of the Governance Group is representative of the stakeholder groups impacted by the Project. Ensure that members are aware of their roles and responsibilities and that they are equipped to provide the required leadership and direction to the Project.
1.2	Provide training and coaching to Governance Group members.	Provide coaching to Governance Group members where required (from an external organisation if necessary) to ensure that they understand their roles and responsibilities and are equipped to deliver them.
1.3	When considering the makeup of the Governance Group consider appointing an independent member who is outside the DOC organisation.	An independent and experienced project delivery professional sitting on the Governance Group who is outside the DOC organisation would provide targeted project delivery and governance experience as well as ongoing independent quality assurance.
1.4	Include key vendors in Governance Group meetings.	Include key vendors in Governance Group meetings to provide a wide coverage and understanding of Project activities and challenges. This will improve transparency, assist in building trust between the parties, and improve the focus on jointly achieving a successful outcome. Vendor representatives may only need to attend part of the Governance Group meetings (e.g., not be present for financial or commercial discussions).
1.5	Review the project structure during the initiation phase.	Carefully consider the structure of the project at the initiation stage. Set-up a multiple project or programme structure if appropriate. Utilise EPMO advice and guidelines. Obtain Sponsor and Governance Group approval of structure as a stage gate before progressing from the initiation stage.
1.6	Ensure that Project Status Reporting is fit for purpose.	Ensure that Project Status Reports contain information at a suitable depth and breadth to fully inform the Governance Group of the status of the Project.
1.7	Maintain a Decision Register to capture key Project decisions.	Maintain a Decision Register to capture key decisions including the context for the decision, approver, approval date, and links to other supporting information such as meeting minutes or approval emails for traceability. This will ensure all key decisions are held in a central repository and information sharing is streamlined, particularly if resource turnover occurs.

#	Recommendation	Rationale
1.8	Maintain a Dependency Register to capture key Project dependencies.	Maintain a Dependency Register to capture key dependencies which are reported in the PSR. Define a schedule to regularly review and update the report.
1.9	Compile a Project Management Plan (PMP) or similar artefact for all projects and programmes.	A PMP is a foundational delivery documentation that we expect to see for any project. It is an approved document (by the Governance Group) used to guide both project execution and project control. It documents planning assumptions and decisions, facilitates communication among project stakeholders, and documents the approved scope, cost, and schedule baselines. A baselined PMP should be part of the stage gate to exit the initiation stage.
1.10	Use the EPMO framework so that projects follow an established and defined delivery process.	Enforce and actively support the use of the EPMO framework to ensure that standard project processes and artefacts such as a project management plan, project registers, test strategy, operational handover artefacts, change control, close out report etc are created to control a projects performance and delivery. The EPMO framework should specify clearly defined stage gate expectations for transitioning between project stages. Exceptions may be made for deviating from the framework, however, these should be formal decisions approved by the SRO or Sponsor and captured in the
1.11	Ensure that key strategies and decisions are documented and provided to the Governance Group for approval.	Project Decision Register. Ensure that artefacts are provided to the Governance Group for key elements and decisions for formal approval (e.g., PMP, Go Live Decision Paper, updates to the baseline). Key artifact approval should be defined in the PMP and project schedule as milestones.
1.12	Baseline the project delivery components.	Baseline the project scope, timeline, key milestones, and budget with clear change tolerances. Any changes to the baseline outside of tolerance should follow a change control process and be approved by the Governance Group.
1.13	Be aware of other major organisation activities and adjust plans to minimise disruption.	Plan the project delivery so that the key milestones do not coincide with other major changes in the organisation. A key responsibility of business stakeholders and Governance Group members should be to assist in identifying actual or potential clashes with other major changes in the organisation. Schedule review workshops are typically used to obtain this information.

#	Recommendation	Rationale	
1.14	Update the Governance Group Terms of Reference (TOR)	The Governance Group TOR needs to be updated to reflect the current makeup of the group and to clarify the roles and responsibilities of the members.	ಮ
1.15	Develop a plan to close the project.	Develop a plan to close the project. This will include system operational handover, business process handover, benefits handover, and financial closure of the project.	7/000
Scope management recommendations			
#	Recommendation	Rationale	
1.16	Consider deploying an MVP which is followed by	A common and proven approach is to have the core upgrade as a first MVP then the enhancements delivered	

Scope management recommendations

#	Recommendation	Rationale	Υ/O,
1.16	Consider deploying an MVP which is followed by incremental enhancements when next doing a system replacement project.	A common and proven approach is upgrade as a first MVP then the entincrementally after the core upgradimmediate focus on delivering the upgrade, then provides flexibility in enhancements depending on the refunding.	nancements delivered le. This allows the MVP which is the core scaling the

Schedule management recommendations

#	Recommendation	Rationale
1.17	Provide a project schedule with the necessary level of detail.	Ensure that a project schedule is created with the necessary level of detail – ensure that this is shared with the Project Team and appropriate stakeholders. A high-level view developed from the detailed plan can be used to support wider communications (e.g., a "Plan on a Page").
	NOE!	The project schedule should be baselined and potentially re-baselined through the project lifecycle as project changes are approved.

Communication recommendations

#	Recommendation	Rationale
1.18	Develop a communication feedback mechanism.	Develop a communication feedback mechanism to provide evidence that communications are reaching the required audience.
1.19	Develop a mechanism to streamline communication approval.	Investigate the method used to approve communication artefacts and look to streamline the approval process where opportunities are identified.

#	Recommendation	Rationale
1.20	Review the DOC lessons learned from the TTA communications review.	Regularly review the DOC TTA communications review paper (Reflections on TTA internal comms to date - DOC-71200273) to ensure that lessons identified by the Team are utilised in future DOC projects.

Training recommendations

#	Recommendation	Rationale
1.21	Ensure that training is fit for purpose for DOC staff.	Review the training strategy used for future projects to ensure the strategy matches the training needs identified for the user base.
1.22	Provide a training environment.	Provide a training environment to enable training data and training scenarios to be set-up, that can be easily refreshed from a training backup, and to ensure that training activities do not clash with testing activities.
1.23	Review the DOC lessons learned for training from the internal TTA reviews.	Regularly review the DOC TTA review papers to ensure that training related lessons identified by the Team are utilised in future DOC projects.

Business readiness recommendations

#	Recommendation	Rationale
1.24	Ensure business readiness activities have been accepted by users.	Understand user expectations for the system changes, identify areas of resistance and provide coaching and support to obtain user support and buy-in.
1.25	Review the DOC lessons learned for business readiness from the internal TTA reviews.	Regularly review the DOC TTA review papers to ensure that business readiness related lessons identified by the Team are utilised in future DOC projects.

Resource management recommendations

	#	Recommendation	Rationale
	1.26	Engage the business in key design and planning	Ensure that the business is engaged in key design and planning decisions.
	decisions.	Ensure that Project domain specialists have access to business representatives to review and test key design elements.	
	1.27	Identify and strengthen resourcing weaknesses early.	During the project, identify resource areas that need strengthening and add extra resource in a timely manner. Avoid loading additional work on existing staff.

#	Recommendation	Rationale
1.28	Provide suitable BAU backfill.	Provide suitable backfill when resources are provided from the business so that BAU is not impacted (and the resource is not expected to fulfil dual roles).
		Ideally personnel should be no less than 80% allocated to a project with 100% backfill which allows for a level of ongoing engagement and advice to BAU where needed.
1.29	Develop a plan to maintain the resilience and motivation of the project team.	The lengthy time frame of the projects introduced risk that resources became stale. Ensure that adequate pastoral care is provided so that staff burnout does not occur.

Benefits management recommendations

#	Recommendation	Rationale
1.30	Update the Benefits Realisation Plan.	Update the Benefits Realisation Plan to reflect the current benefit owners.

Risk management recommendations

#	Recommendation	Rationale
1.31	Clarify the RAG status meanings.	Clarify the logic used to assess the RAG statuses used to describe the Project areas in the PSR reports. Use EPMO guidelines where appropriate.
1.32	Carry out regular risk workshops.	Carry out regular risk workshops to keep risks current. Include vendors where appropriate to ensure a wide coverage of potential risk areas.

Quality management recommendations

#	Recommendation	Rationale
1	and Test Plan, approved by the Governance Group, before entering the test phase.	Have a clear Test Strategy and Test Plan baselined before entering into the test phase. These should be approved by the Governance Group and cover all testing to be competed including entry and exit criteria for each type of testing. Any exceptions should be managed through a formal change process and decisions recorded in the decision register.
1.	34 Ensure that testing is fully completed and documented in a Test Exit Report.	Ensure that testing is fully completed, including UAT testing, end to end testing, data migration testing, etc, and that results are presented in a Test Exit Report for approval before committing to the system go live.

#	Recommendation	Rationale	
1.35 Perform a go live dress rehearsal.		Perform a go live dress rehearsal prior to go live to test and confirm the go live activities. This includes the technical system roll out and data migration (including system rollback plans), communication activities, and post go live support processes.	V
1.36	Identify and resolve areas of the production system that have not been fully tested.	Identify areas of the current production system that have not been fully tested. Create a plan to ensure that all areas of the system have been tested.	
Other	recommendations	.04	
#	Recommendation	Rationale	
1.37	Identify and collect lessons	Collecting lessons 'as you go' rather than at the end will ensure that they are captured, and meaningful	

Other recommendations

	#	Recommendation	Rationale
	1.37	Identify and collect lessons learned during the Project on a regular basis.	Collecting lessons 'as you go' rather than at the end will ensure that they are captured, and meaningful information is collected. The lessons should be regularly reviewed by the Project Team and used to inform assurance activity.
	1.38	Ensure that lessons are passed to the EPMO so that future DOC projects can benefit.	Pass the lessons learned during the Project to the EPMO so that they can contribute to the PMO library of lessons for the benefit of future projects.
RELE	S	EDUNDERTHE	



Document Signoff

Management Comment

The department acknowledges that this project, while providing the foundation for highperforming financial and asset performance, was less than optimal from a people change and governance perspective.

We are pleased that the reviewer has commented positively on the remedial activities that the department has undertaken since go-live of this project and has acknowledged the internal recommendations throughout the IQA as fit-for-purpose.

The department will be taking the recommendations from this report, combined with the insights already recorded, to develop an action plan for finalising the deployment of the 9(2)(b)(ii) product set suitable for our people. The department will also assess the wider recommendation sets and incorporate them into themed organisational Project and Programme lessons.

Next Steps

Please contact us if you would like to discuss the details of this report in person. We are happy to answer any questions or provide further explanations around the findings and intent of the recommendations.

Signoff

RIHEOF Mike Tully Senior Responsible Owner Department of Conservation



14 December 2022

Appendix A - Terms of Reference & Approach

Scope of our review

The scope of this review included the following:

- Assessment of the project governance and management environment in place (including roles and responsibilities (both internal and vendor), capability, capacity, approach, processes, standards, and controls) to support successful project delivery.
- Scope definition and management: how well the scope was defined and understood by all
 parties (inclusions and exclusions) to deliver expected outcomes, and how deviations from
 scope are controlled.
- Schedule and dependency management: how the work has been estimated, sized and resourced, together with how dependencies within and outside of the project are understood, monitored and controlled.
- Change management: provide a view on the suitability of the change management and training strategies/approach being taken, including how change impacts have been identified and assessed.
- Resource management: the project's resourcing approach, its effectiveness, and the
 resource capability and capacity to deliver expected business outcomes, including
 stakeholder engagement and communication between DOC and vendors.
- Financial management: including budgets, approvals, and reporting, how variances and deviations from budget are managed, and whether the project budget is tracking according to planned spend.
- Benefits management: including how benefits are identified and defined, whether benefits
 are SMART and will deliver for the project the returns claimed, what benefit measures and
 KPIs are agreed, and how benefit realisation will be monitored during and post project.
- Risk and issues management: how risks and issues are identified, defined and mitigated/resolved together with ongoing monitoring and management activities.
- Quality management: how quality of the project outcomes is defined, tested and assured during delivery, and how outstanding issues arising from testing activities, including prioritisation, fix and retest regimes, will be managed.
- Identification of findings (key risks, strengths, learnings, and improvement opportunities) together with pragmatic recommendations in relation to any improvement opportunities.

Scope exclusions

The scope of this review excluded the following:

- Detailed review of the project feasibility studies, Business Case, and cost/benefit analysis.
- Detailed review of the procurement process (ROI, RFP) and resulting contracts.
- Review of technical/system/product design and its appropriateness.



Our approach

This diagram outlines the key steps we took to understand the project and assess its current state.



As part of our review, we sought views from the people listed below. We would like to thank them for their input to this review.

People we spoke with

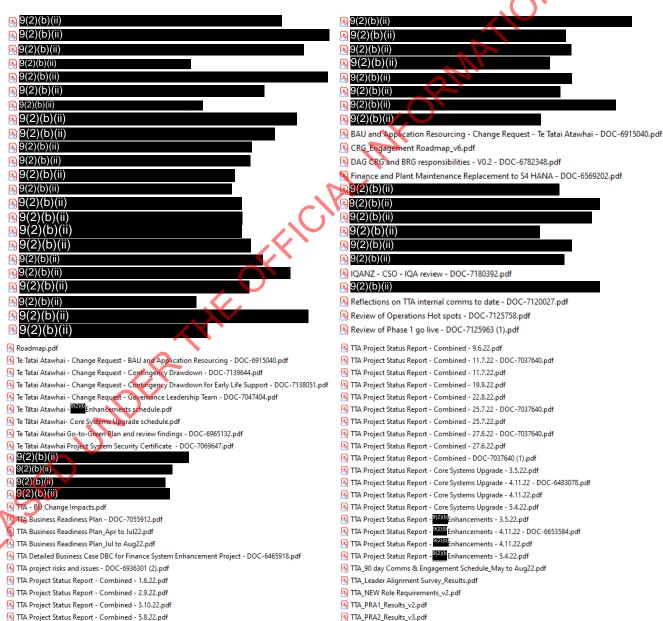
- Karen Howard Te Tātai Atawhai Projects Manager, CSG
- 2. Donna Kieboom Communications Lead
- 3. 9(2)(a) -9(2)(b)(ii)
- ¹. 9(2)(a) -9(2)(b)(ii)
- 9(2)(a) -9(2)(b)(ii)
- 6. 9(2)(a) -9(2)(b)(ii)
- 7. Jeffrey Cornwell Chief Advisor to DD-G Organisation Support
- 8. Ross Bowyer Portfolio Assurance Manager
- 9. Mike Edginton Chief Information Officer, CSG
- Paul Simonsen Supplier Sourcing Manager, CSG
- 11. Rose Hobden Business Change Manager
- Tim Bamford Director Heritage & Visitor, Policy & Visitors
- 13. Sharon Alderson Director Planning Support, Biodiversity
- 14. Caitriona Lewis Acting Director Outcomes Management

- 15. Bronwyn McDonald Employer Relationship Manager, People
- 16. Bruce Norris Digital Strategy Portfolio Manager, CSG
- 17. Madhan Vasudevan Solutions Architect,
- 18. Steve Taylor Senior Responsible Owner, Acting DD-G Corporate Services Group
- 19. Mike Tully Senior Responsible Owner, DD-G Organisation Support
- 20. Kevin Martin Senior Responsible Owner, Chief Financial Officer
- 21. Darryl Lew Director Operations Planning, Ops
- 22. CJ Juby Director Business Support, CSG
- 23. Rachel Bruce Sponsor, DD-G Corporate Services Group
- 24. Shaun Dunning EAM Stream Lead
- 25. 9(2)(a) -9(2)(b)(ii)
- 26. Jay Eden Operations Planning

Review Team

Team Member	Role	Substantive Role	202
9(2)(a)			700
9(2)(a)			<u></u>

Documents we reviewed

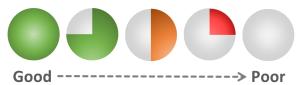


🕒 Update – Te Tātai Atawhai reviews - DOC-7126309 (3).pdf	№ 9(2)(b)(ii) - EAM.pdf
№ 9(2)(b)(ii)	9(2)(b)(ii) Finance.pdf
	9(2)(b)(ii) - Procurement.pdf
9(2)(b)(ii)	⊕ Q(2)(b)(ii) GIS Approved.pdf
(a) 9(2)(b)(ii)	DOC stakeholders 22 March - DOC-6599470.xlsx
9(2)(b)(ii)	Documentation Checklist_TTA Projects IQA.xlsx
№9(2)(b)(ii)	Financial Systems Upgrade Project Budget Enhancements - DOC-6587106 (1).
(2)(b)(ii)	Financial Systems Upgrade Project Budget update CORE - DOC-6573191 (1).x
(2)(b)(ii)	Pi Open Jiras - 220622 1300.xlsx
	Risk Matrix PMF - DOC-6629355.xlsx
(A) 9(2)(b)(ii)	
(A) 9(2)(b)(ii)	TA Cutover Runsheet - 220707.xlsx
(3) 9(2)(b)(ii)	TTA Embedding Stakeholder Register - DOC-7183131.xlsx
(A) 9(2)(b)(ii)	TTA Issues for IQA as at 20.10.22.xIsx
(A) 9(2)(b)(ii)	TTA Project Registers - IQA.xIsx
<u>9(2)(b)(ii)</u>	TTA Risks for IQA as at 20.10.22.xlsx
<u>§</u> 9(2)(b)(ii)	Change Metrics Dashboard_sample.pptx
<u>9(2)(b)(ii)</u>	change observations - CONFIDENTIAL.pptx
9(2)(b)(ii)	Cutover Schedule Diagram.pptx
<u> 9(2)(b)(ii)</u>	Early Life Support.pptx
9(2)(b)(ii)	Project organisation chart.pptx
<u> 9(2)(b)(ii)</u>	9(2)(b)(ii) Deployment Pack - DOC-7065157.pptx
<u>[9(2)(b)(ii)</u>	workflow for PCo - DOC-7211305.pptx
[3] 9(2)(b)(ii)	Stakeholder Levels.pptx
	Te Tătai Atawhai - Governance Group Minutes - 21.9.22.docx
TTA Change Roadmap 2021.pptx	Te Tatai Atawhai - Governance Group Minutes - 24.8.22.docx
₼ TTA Change Roadmap 2022.pptx	te Tātai Atawhai - Governance Group Minutes - 27.7.22.docx
TTA Project - CCB Overview.pptx	Te Tatai Atawhai Governance Group Minutes - 29.6.22.docx
ात <mark>9(2)(b)(ti)</mark> so-Live Decision Pack - July 2022 - DOC-7077758.pptx स्त्री High Level Solution Architecture - <mark>9(2)(b)(ti)</mark>). Te Tâtai Atawhai Project - DOC-6616355.doc	्री Te Tātai Atawhāi - Lessons Learned - Tenzing.docx ्री Te Tātai Atawhai - Project lead Review of Phase 1 go live .docx
Operational Readiness Checklist - DOC-6978992.docx	Te Tatai Atawhai - Project Review - Operations - DOC-7125758.docx
Review of Operations Hot spots - DOC-7125758.docx	Te Tatai Atawhai review - Governance noting paper - DOC-7126309.docx
Review of Phase 1 go live.docx	Training Strategy Embedding TTA - DOC-7170876.docx
e Tetai Atawhai - Directors Advisory Group minutes - 8.2.22.docx □ Te Tätai Atawhai - Directors Advisory Group minutes - 22.2.22.docx	∰TTA - Directors Advisory Group TOR - DOC-6784622.docx ∰TTA – Early Life Support (ELS) Guidance.docx
Te Tātai Atawhai - Directors Advisory Group minutes - 26.1.22.docx	TTA Governance Group TOR - DOC-6913388.docx
Te Tātai Atawhai - Governance Group agenda - 2.11.22.docx	TTA The Enhancements Project - Benefit Profile and Realisation Plan - DOC-6598768 (2).c
e Tētai Atawhai - Governance Group agenda - 5.10.22.docx □ Te Tātai Atawhai - Governance Group agenda - 19.10.22.docx	∰TTA ^{ELUTE} Finance and Plant Maintenance Replacement to S4HANA Project - Benefit Profi ∰Update – Te Tātai Atawhai reviews - DOC-7126309.docx
Te Tatai Atawhai - Governance Group agenda - 19.10.22.docx	Te Tatai Atawhai - Core Systems Upgrade - Schedule and Resource plan.mpp
Te Tatai Atawhai - Governance Group Minutes - 1.6.22.docx	
Te Tātai Atawhai - Governance Group Minutes - 2.11.22.docx	TTA Training Overview.ods
्री Te Tätai Atawhai - Governance Group Minutes - 7.79.22.docx ्री Te Tätai Atawhai - Governance Group Minutes - 9.10.22.docx	☐ Agenda and Papers - Monday 27 June CCB Meeting.msg ☐ Change Control Board Meeting Minutes - 27 June 2022.msg
Te Tătai Atawhai - Governance Group Minutes - 10.8.22.docx	Schalige control books incessing himates 27 June 2022 in 129
Te Tātai Atawhai - Governance Group Minutes - 13.7.22.docx	
e Tātai Atawhai - Governance Group Minutes - 15.6.22.docx	
Te Tatai Atawhai - Governance Group Minutes - 15.6.22.docx	
// Y	
~	

Appendix B - What the ratings mean

Component Rating

success.



ON ACT 1982 Rating Description Appropriate and fit for purpose. No material improvement opportunities exist. Mostly appropriate and fit for purpose. Minor improvement opportunities exist. Development needed. Material improvement opportunities exist. Not appropriate or fit for purpose. Significant material improvements are needed. Insufficient for project needs, creating an unacceptable level of risk to project RELEASEDUNDER

Document Control

Document Information

Ver **Document Name** Te Tātai Atawhai Projects IQA Review Contact 9(2)(a) Final Status

Document History

Author	Description of Change	Date	NA	Version
9(2)(a)				

Distribution Control

	Person	Role	Date of Issue	Version
	Ross Bowyer	Portfolio Assurance Manager, EPMO	9 December 2022	0.2
	Mike Tully	Senior Responsible Owner	9 December 2022	0.2
	Ross Bowyer	Portfolio Assurance Manager, EPMO	14 December 2022	1.0
	Mike Tully	Senior Responsible Owner	14 December 2022	1.0
RELE	ASEDURA			