

DEPARTMENT OF HEALTH AND HUMAN SERVICES ENTERPRISE PERFORMANCE LIFE CYCLE FRAMEWORK

<OPDIV Logo>

CHECKLIST

INDEPENDENT VERIFICATION & VALIDATION (IV&V)

Issue Date: <mm/dd/yyyy>
Revision Date: <mm/dd/yyyy>

Document Purpose

This checklist is a brief document listing the items to be noted, checked, remembered, and delivered when completing the accompanying template and/or project management practice.

Activities Checklist

Has a preliminary assessment been performed identifying IV&V activity and reporting
requirements appropriate for the project?
Has a specific plan been developed to outline the IV&V effort?
Has a budget been established for the IV&V effort?
Has the appropriate governance body approved the IV&V Plan?
Has an IV&V provider solicitation mechanism been developed (RFP, SOW)?
Has a qualified IV&V provider been selected?
Have specific IV&V acceptance criteria been established and agreed upon?
Has the IV&V effort and approach been communicated to the project team?
Has a method for measuring performance metrics been identified and agreed upon?
Has the IV&V assessment(s) been performed?
Have assessment reports been provided to project stakeholders?
Have IV&V recommendations been evaluated, implemented, and incorporated into project
activities?
Are IV&V findings incorporated into the Lessons Learned repository?