<Enter Project Name Here>

Site Certification Checklist



Department of Veterans Affairs

<Month><Year>

Version *<#.#>*

This template contains a paragraph style called Instructional Text. Text using this paragraph style is designed to assist the reader in completing the document. Text in paragraphs added after this help text is automatically set to the appropriate body text level. For best results and to maintain formatting consistency, use the provided paragraph styles. Delete all instructional text before publishing or distributing the document Revision History.

This template conforms to the latest Section 508 guidelines. The user of the template is responsible to maintain Section 508 conformance for any artifact created from this template.

Revision History

| Date | Version | Description | Author |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |

Place latest revisions at top of table.

The Revision History pertains only to changes in the content of the document or any updates made after distribution. It does not apply to the formatting of the template.

Remove blank rows.

Table of Contents

[1. Project Site Certification Checklist 1](#_Toc411935467)

[2. Hardware Deployment 2](#_Toc411935468)

[3. Software Deployment 2](#_Toc411935469)

[4. Hardware Validation 2](#_Toc411935470)

[5. Installation 2](#_Toc411935471)

[6. Site has received the following project manuals 2](#_Toc411935472)

[7. All scheduled training has occurred 3](#_Toc411935473)

[8. VBECS validation in a test account has been completed 3](#_Toc411935474)

[9. Communication 3](#_Toc411935475)

*<Project Name>* Site Certification Checklist

VISN: Site: Station Number: Date:

Implementation Manager:

IM Phone #:

Facility Laboratory Point of Contact:

Lab POC Phone #:

Facility IRM Point of Contact:

IRM POC Phone #:

# Project Site Certification Checklist

| Pre-implementation Certification/Acceptance Criteria | Date Accomplished: | Accomplished By: | COMMENTS/Notes: |
| --- | --- | --- | --- |
| Insert any steps within each heading (or develop headings appropriate to project being implemented) that must be accomplished in order to achieve implementation (some examples follow).  |  |  |  |
| Established a VLAN |  |  |  |
| Established VistA test account  |  |  |  |
| Verified installation of requisite patches for *<Patch names>* in test:* Patch number(s)
 |  |  |  |
| Verified installation of requisite patches for Project |  |  |  |
| Reviewed Project Pre-Implementation Data Validation, Mapping, and Conversion ADPAC Guide Version 1.0 |  |  |  |

# Hardware Deployment

1. Received all hardware (Appendix B, Installation Guide) and printer supplies <Y, N, or N/A>
2. Completed Hardware Checklist (Appendix B, Installation Guide) <Y, N, or N/A>
3. Attached Hardware Checklist to this document for final submission <Y, N, or N/A>
4. Completed Configuration Installation Guide) <Y, N, or N/A>

# Software Deployment

1. Received associated software <Y, N, or N/A>
2. Installed software in test account <Y, N, or N/A>
3. Installed software in production account <Y, N, or N/A>

# Hardware Validation

1. Workstation was operational in test account <Y, N, or N/A>
2. Printers were functionally tested and found operational in test account. <Y, N, or N/A>
3. Bar Code Scanner was functionally tested in test account. (Use Appendix E from the Installation Guide) <Y, N, or N/A>

# Installation

1. Software was installed and tested on the test Database Server <Y, N, or N/A>
2. Server back-ups were tested <Y, N, or N/A>
3. Workstations used for local training were tested <Y, N, or N/A>
4. Terminal Services software was installed on all production workstations and all workstations were tested <Y, N, or N/A>
5. Software security set-up was tested <Y, N, or N/A>
6. All workstations installed have the same version of Terminal Services software installed <Y, N, or N/A>
7. All printers connected to workstations were tested <Y, N, or N/A>
8. Bar code Scanners connected to workstations were tested <Y, N, or N/A>
9. HL7 interface was tested <Y, N, or N/A>
10. Appendix D, Installation Guide has been completed and attached to this document for submission <Y, N, or N/A>

# Site has received the following project manuals

1. Pre-Implementation Data Validation, Mapping, and Conversion Technical Manual <Y, N, or N/A>
2. Pre-Implementation Data Validation, Mapping, and Conversion ADPAC Guide <Y, N, or N/A>
3. Computer Software User Guide <Y, N, or N/A>
4. Computer Software Installation Guide <Y, N, or N/A>

# All scheduled training has occurred

1. National Training <Y, N, or N/A>
2. Local staff training <Y, N, or N/A>
3. Certificate of training has been received or was requested <Y, N, or N/A>

# VBECS validation in a test account has been completed

1. VBECS validation in a test account has been completed <Y, N, or N/A>

# Communication

1. Staff not directly involved with implementation has been notified of the date for going live <Y, N, or N/A>
2. Others within the organization have been notified of the go-live date (other departments not directly involved in the software change- e.g. the nursing department) <Y, N, or N/A>
3. Customers have been notified of the go live date (Other users, as indicated) <Y, N, or N/A>

Template Revision History

| Date | Version | Description | Author |
| --- | --- | --- | --- |
| February 2015 | 1.2 | Upgraded to MS Office 2007-2010 version, edited to conform with latest Section 508 guidelines, and remediated with Common Look Office tool | Process Management |
| April 2012 | 1.1 | Formatted to ProPath documentation standards | Process Management |
| October 2011 | 1.0 | Initial document | Process Management |

Place latest revisions at top of table.

The Template Revision History pertains only to the format of the template. It does not apply to the content of the document or any changes or updates to the content of the document after distribution.

The Template Revision History can be removed at the discretion of the author of the document.

Remove blank rows.