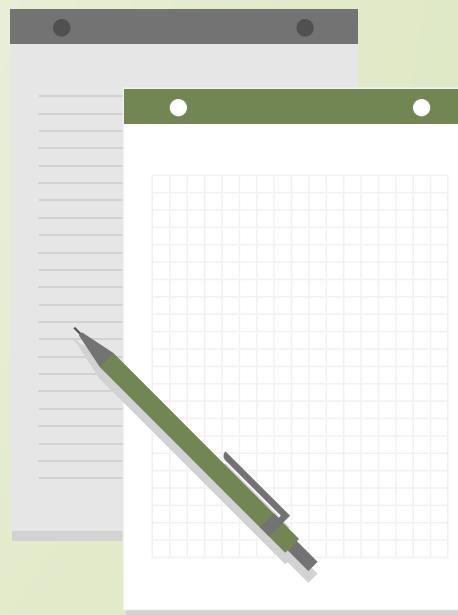


Dedicated Fund - IT Projects

Preparing Interim Report and Overall Evaluation Report Points-to-Note

**Social Welfare Department
Information Systems and Technology Branch**



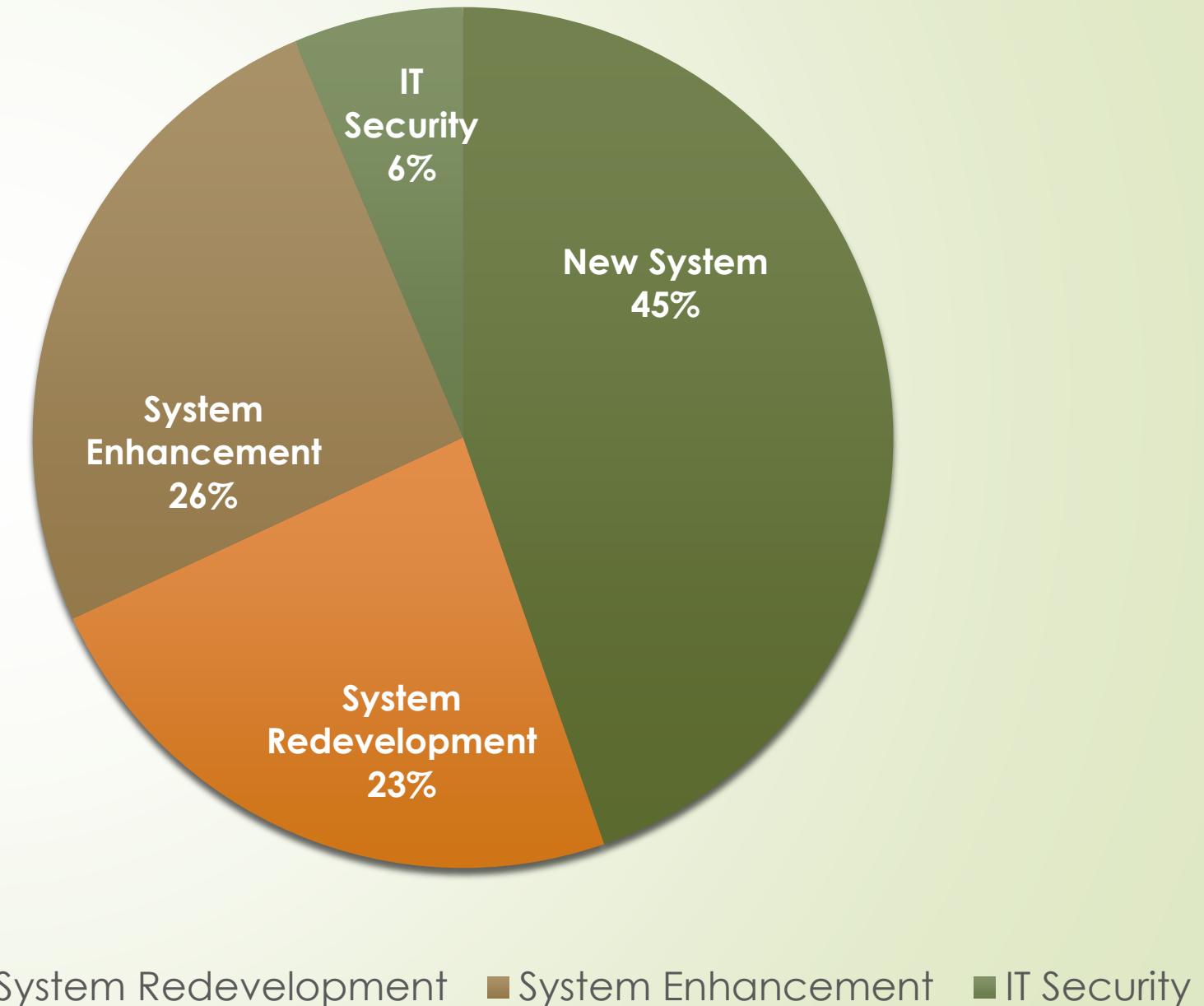


Overview on Approved IT Projects

Dedicated Fund – IT Projects

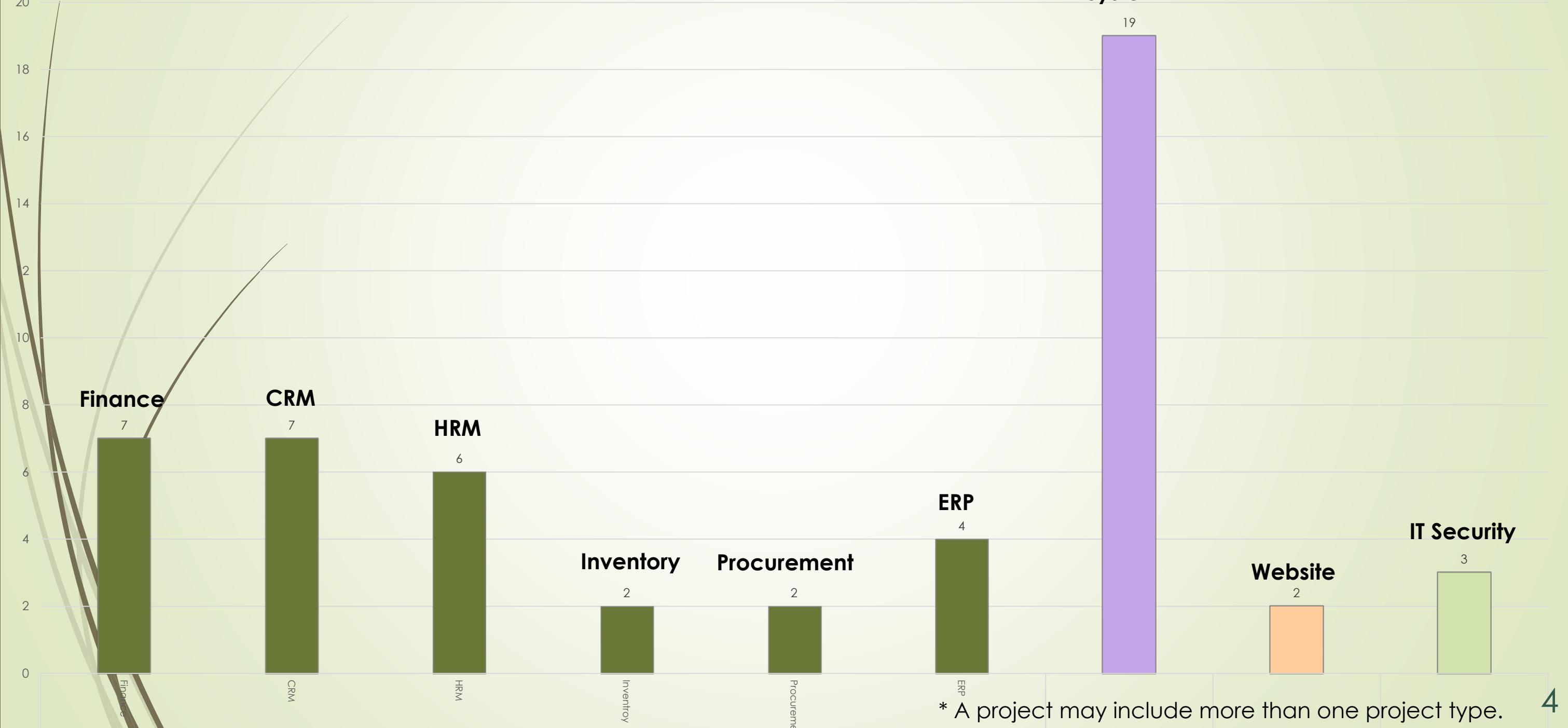
Nature of the Approved Projects

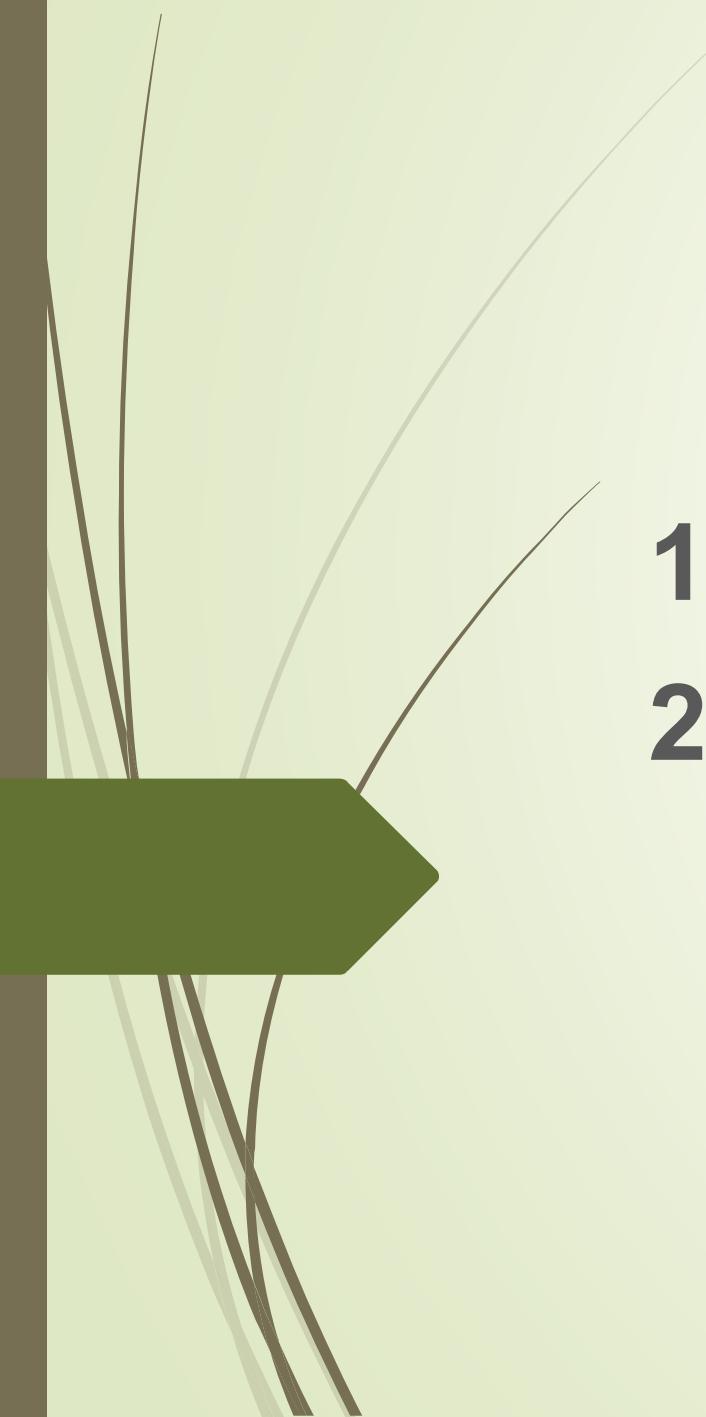
- By end-December 2025, **SWD has approved a total of 47 IT project**
- Projects include:
 - ✓ Human Resource Management System
 - ✓ Central Procurement System
 - ✓ Online Registration and Payment System
 - ✓ Case and Activity Management System
 - ✓ Enterprise Resource Planning System
 - ✓ Security Risk Assessment and Audit



Project Types

Service Management System



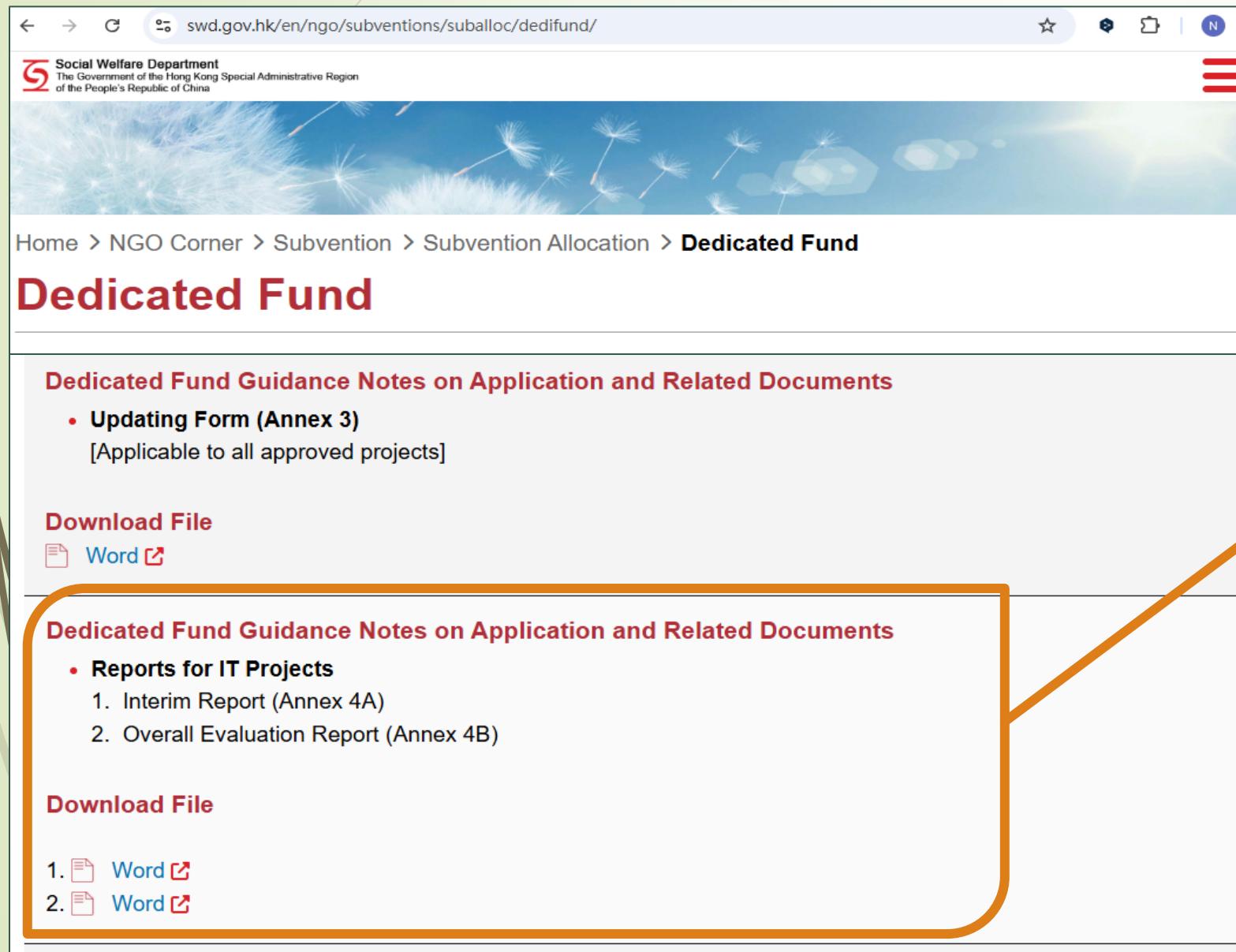


Points-to-Note in Preparation

- 1. Interim Report (IR)**
- 2. Overall Evaluation Report (OER)**

Download Templates

SWD Homepage (www.swd.gov.hk) > NGO Corner > Subvention > Subvention Allocation > Dedicated Fund



The screenshot shows a webpage from the Social Welfare Department (SWD) of the Hong Kong Special Administrative Region. The URL in the address bar is swd.gov.hk/en/ngo/subventions/suballoc/dedifund/. The page title is "Dedicated Fund". The main content area is titled "Dedicated Fund Guidance Notes on Application and Related Documents". It contains two sections:

- Updating Form (Annex 3)**
[Applicable to all approved projects]
- Dedicated Fund Guidance Notes on Application and Related Documents**
 - Reports for IT Projects**
 1. Interim Report (Annex 4A)
 2. Overall Evaluation Report (Annex 4B)

Below each section is a "Download File" button with a Word document icon.

Interim Report (Annex 4A)
Overall Evaluation Report (Annex 4B)

Interim Report (Annex 4A)

Interim Report¹
for Information Technology (IT) Project²
Dedicated Fund (DF)

1. Name of the NGO¹

Enter Name of the NGO¹

2. Name of the IT Project *[Please state the original name and the revised name, if any]*¹

Enter Name of IT Project¹

3. Approved IT Project¹

	Original ¹	Revised (if applicable) ¹
Approved Amount ¹	Original Approved Amount ¹	Revised Approved Amount ¹
Date of approval ¹	Original Approval Date ¹	Revised Approval Date ¹

4. Has your Agency changed the implementation schedule?¹

No¹ Yes *[Please provide the revised schedule below]*¹

Planned Schedule¹ From¹ Start Date¹ (mm/yyyy) to¹ End Date¹ (mm/yyyy)¹

Revised Schedule¹ From¹ Start Date¹ (mm/yyyy) to¹ End Date¹ (mm/yyyy)¹

¹ The NGO is required to send this Interim Report to the Information Systems and Technology Branch (ISTB) of the Social Welfare Department (SWD) when the project approaches half-way of the approved implementation schedule (from the start date of the project to the completion of system nursing). Besides, the Overall Evaluation Report is required to reach ISTB within three months after the completion of system nursing. Soft copy can be sent to nga_chi_law@swd.gov.hk¹

² Planned schedule as stated in Section 2.1(g) of the Application Form for the IT Project (i.e. Appendix A2).¹

**Please refer to the
Notification Letter issued
by Subventions
Branch/SWD for the
approved amount and
Date of approval (please
use the date of the letter)**

**Provide the project's
latest start and end date
if there is any changes**

DF Interim Report¹
Annex 4A²

Interim Report¹
for Information Technology (IT) Project²
Dedicated Fund (DF)²

1. Name of the NGO¹
Enter Name of the NGO¹

2. Name of the IT Project *(Please state the original name and the revised name, if any)*¹
Enter Name of IT Project¹

3. Approved IT Project²

	Original ¹	Revised (if applicable) ²
Approved Amount ¹	Original Approved Amount ¹	Revised Approved Amount ²
Date of approval ¹	Original Approval Date ¹	Revised Approval Date ²

4. Has your Agency changed the implementation schedule?²
 No² Yes *(Please provide the revised schedule below)*²

Planned Schedule¹ From¹ Start Date¹ (mm/yyyy) to¹ End Date¹ (mm/yyyy)¹

Revised Schedule² From² Start Date² (mm/yyyy) to² End Date² (mm/yyyy)²

**For revision of approved
amount, please submit
Updating Form (Annex 3)
in advance for seeking
approval from SWD**

5. Project Progress↓

Input the original Implementation Plan as stated in the submitted Application Form (Appendix A2)

Stage ³ ✉	Planned Start Date (mm/yyyy) ⁴ ✉	Planned End Date (mm/yyyy) ⁴ ✉	Actual / Expected Start Date (mm/yyyy) ⁴ ✉	Actual/Expected End Date (mm/yyyy) ⁴ ✉	Reasons for Deviation✉
Tendering ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
Project Initiation ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
System Analysis and Design ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
System Development ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
System Integration Test / User Acceptance Test ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
Data Conversion ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
System Installation ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
Security Risk Assessment and Audit ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
Privacy Impact Assessment ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
Production Rollout ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
System Nursing ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
✉	✉	✉	✉	✉	✉
Total Duration for Completion of the Project⁴✉	Enter No. of Month(s) ↴	Months ⁵ ✉	Enter No. of Month(s) ↴	Months ⁵ ✉	✉
英 System Maintenance ⁵ ✉	Start Date ↴	End Date ↴	Start Date ↴	End Date ↴	Enter Reasons ↴
✉	✉	✉	✉	✉	✉
Total Duration of the Project (Include System Maintenance)⁴✉	Enter No. of Month(s) ↴	Months ⁵ ✉	Enter No. of Month(s) ↴	Months ⁵ ✉	✉

Reason SHOULD be provided for any deviation from the original Implementation Plan

From Tendering to System Nursing

From Tendering to System Maintenance

Describe in details the difficulties encountered in the process and follow-up actions addressing the delay in Implementation Plan

Provide proposed measures and monitoring strategies to ensure the project can remain on track with the revised project schedule

6. Implementation Progress of the Project

Checkbox for implementation Progress of the Project on schedule

On schedule

Behind schedule *[Please specify the difficulties encountered and the proposed solutions]*

Enter the implementation progress

7. Other Remarks *[Any other information relevant to the project implementation progress]*

Enter other remarks

Prepared by:

(Enter the name of the person)

Post:

Enter Post

Tel. No.:

Enter Tel. No.

Date:

Date

Endorsed by:

(Enter the name of the person)

Post:

NGO / Division Head

Tel. No.:

Enter Tel. No.

Date:

Date

Remark: Further Interim Report(s) will be required for projects with revised schedule or extended project duration. Date of submission of further Interim Report(s) will be advised by the SWD.

Overall Evaluation Report (Annex 4B)

Overall Evaluation Report for Information Technology (IT) Project Dedicated Fund (DF)

1. Name of the NGO↓

Enter Name of the NGO

2. Name of the IT Project *[Please state the original name and the revised name, if applicable]*↓

Enter Name of the IT Project

3. Approved IT Project↓

Approved Amount	Original	Revised (if applicable)
Date of approval	Original Approval Date	Revised Approval Date

4. Actual Project Expenditure↓

HK\$: Enter Actual Project Expenditure

**Overall Evaluation Report¹
for Information Technology (IT) Project¹
Dedicated Fund (DF)¹**

1. Name of the NGO¹
Enter Name of the NGO¹
2. Name of the IT Project *[Please state the original name and the revised name, if applicable]*¹
Enter Name of the IT Project¹
3. Approved IT Project¹

	Original ¹	Revised (if applicable) ¹
Approved Amount ¹	Original Approved Amount	Revised Approved Amount
Date of approval ¹	Original Approval Date ¹	Revised Approval Date ¹
4. Actual Project Expenditure¹
HK\$: Enter Actual Project Expenditure¹

**The principles for
completing P.1 and P.2
is the same as that of
Interim Report.**

5. Project Duration¹

Stage ¹	Planned Start Date (mm/yyyy)	Planned End Date (mm/yyyy)	Actual Start Date (mm/yyyy)	Actual End Date (mm/yyyy)	Reasons for Deviation ³
Tendering ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Project Initiation ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
System Analysis and Design ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
System Development ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
System Integration Test / User Acceptance Test ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Data Conversion ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
System Installation ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Security Risk Assessment and Audit ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Privacy Impact Assessment ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Production Rollout ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
System Nursing ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Total Duration for Completion of the Project²	Enter No. of Month(s) ³	Months ³	Enter No. of Month(s) ³	Months ³	
System Maintenance ¹	Start Date ¹	End Date ¹	Start Date ¹	End Date ¹	Enter Reasons ¹
Total Duration of the Project (include System Maintenance)	Enter No. of Month(s) ³	Months ³	Enter No. of Month(s) ³	Months ³	

¹ Please tally with the Implementation Plan at Section 2.1(g) of the Application Form for the IT Project (i.e. Appendix A2).¹² From start date of the project to end date of system nursing.¹³ Please tally with the Application Form for the IT Project (i.e. Appendix A2), Section 1.1 and Section 2.1(g).¹

6. Has your Agency changed the implementation schedule?

No Yes *[Please provide the revised schedule below]*

Revised Schedule: From Start Date (mm/yyyy) to End Date (mm/yyyy)

7. Date of Interim Report submitted: Enter Date

Dates of Further Interim Report(s) submitted (if any): Enter Date(s)

8. Project Deliverables *[Please "✓" as appropriate and provide information as applicable]*

Project Deliverable	Description
<input type="checkbox"/> Project Initiation Document	Enter Description
<input type="checkbox"/> Technical Document(s) (e.g. System Analysis and Design Report, Program Specification)	Enter Description
<input type="checkbox"/> Other IT Project Document(s) (e.g. User Acceptance Test Plan and Report, Backup and Recovery Procedure)	Enter Description
<input type="checkbox"/> Web Accessibility Compliance (For website and web-based application projects)	Enter Description
<input checked="" type="checkbox"/> System Security Measures/Manual(s) (e.g. Security Risk Assessment and Audit Report)	Enter Description
<input type="checkbox"/> Privacy Impact Assessment (e.g. Privacy Impact Assessment and Privacy Compliance Audit Report)	Enter Description
<input type="checkbox"/> User Training(s)	Enter Description
<input type="checkbox"/> User / Operation Manual(s)	Enter Description
<input type="checkbox"/> Administration Manual(s)	Enter Description

Description on the project deliverables SHOULD be provided. Please refer to below example:

Example for SRAA:
Date of SRAA report: 15 December 2025

Key findings and remediation :

- 4 high-risk and 3 medium-risk items identified; and
- Remediation plan has been implemented for the identified items.

Date of the SRAA report endorsed by the agency: 16 January 2026

DF Evaluation Report
Annex 4B

9. Project Benefits [Please "✓" as appropriate and provide information as applicable]

Project Benefits	Description
<input type="checkbox"/> Annual Savings in Staff Effort	Enter Description
<input type="checkbox"/> Other Savings / Additional Revenue	Enter Description
<input type="checkbox"/> Improvement in Operational Efficiency	Enter Description
<input type="checkbox"/> Improvement in Service Delivery	Enter Description
<input type="checkbox"/> Improvement in Corporate Image	Enter Description
<input type="checkbox"/> Other Intangible Benefits (e.g. facilitate data sharing among units)	Enter Description

10. Difficulties Encountered [Please "✓" as appropriate and provide information as applicable]

Difficulties Encountered	Description and Solutions
<input type="checkbox"/> Tendering / Tenders vetting	Enter Description / Solutions
<input type="checkbox"/> Users' Requirements	Enter Description / Solutions
<input type="checkbox"/> Contractor Management	Enter Description / Solutions
<input type="checkbox"/> Staff Turnover / Manpower	Enter Description / Solutions
<input type="checkbox"/> Delay of Project (Please highlight reasons of delay)	Enter Description / Solutions
<input type="checkbox"/> Other Difficulties/ Issues (Please specify)	Enter Description / Solutions

11. Employment of IT Professionals in overseeing the implementation of the Project

No Yes (Please specify): Enter the description

DF Evaluation Report
Annex 4B

12. Lessons / Experience Learnt from the Project
Enter Lessons / Experience Learnt from the Project

13. Other Remarks (if any)
Enter other remarks

Prepared by: (Enter the name of the person)

Post: Enter Post

Tel. No.: Enter Tel. No.

Date: Date

Endorsed by: (Enter the name of the person)

Post: NGO / Division Head

Tel. No.: Enter Tel. No.

Date: Date

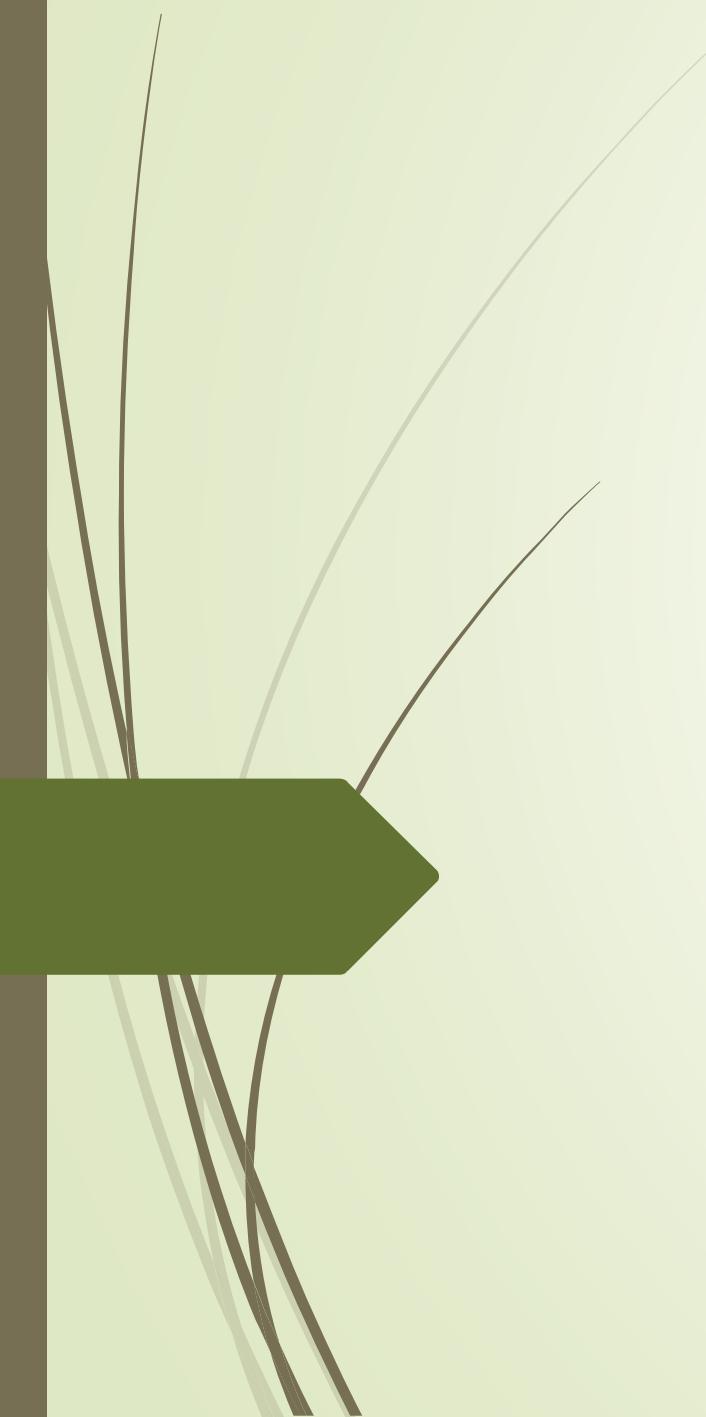
The NGO is required to send this **Overall Evaluation Report** to the Information Systems and Technology Branch (ISTB) of the Social Welfare Department. Soft copy can be sent to nga_chi_law@swd.gov.hk.

(i) Evaluation Mechanism

Output and Outcome Standard Measurement	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide details
Participants' Satisfaction Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Assesses user experience through structured questionnaires, scoring feedback on relevance, quality, and satisfaction using Likert scales
Internal and External Customer Feedback	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Enter details
Other	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Enter details

Report the insights and experiences gained in this IT project and critical successful factors.

Provide the result of Evaluation Mechanism stated in the Application Form (Appendix A2).



Submission of IR and OER Workflow



Download the IR / OER template

(SWD Homepage (www.swd.gov.hk) > NGO Corner > Subvention > Subvention Allocation > Dedicated Fund)

Email the draft report to ISTB/SWD for comments

(Email address: nga_chi_law@swd.gov.hk)

Confirmation of IR / OER by ISTB/SWD

Upload the confirmed report to the Service Performance Management Information System (SPMIS)

Enquiry

**Miss Sarah LAW, Social Work Officer,
Information Systems and Technology (4)**

Tel: 2136 8737

Email: nga_chi_law@swd.gov.hk