

**Appendix 1 : InnovateStart Final Report**

**Appendix 2: InnovateStart Programme Impact Metrics**

**Appendix 3 : InnovateStart Case Study**

# Appendix 1

InnovateStart Final Report Day 2 - 5

|  |  |
| --- | --- |
| **Company Name** | Click or tap here to enter text. |
| **Company Contact** | Click or tap here to enter text. |
| **Project Completion Date** | Click or tap to enter a date. |

InnovateStart Project Output Details

|  |  |  |  |
| --- | --- | --- | --- |
| **PART I: Project Team (including Internal Innovation Champions)** | | | |
| Team Member 1 | Job Title | Brief Description of Input and Contribution | Office Base |
| Team Member 2 | Job Title | Brief Description of Input and Contribution | Office Base |
| Team Member 3 | Job Title | Brief Description of Input and Contribution | Office Base |
| Team Member 4 | Job Title | Brief Description of Input and Contribution | Office Base |
| Team Member 5 | Job Title | Brief Description of Input and Contribution | Office Base |

PART II: Project Review

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What key elements of the ISO 56002 Standard was the team introduced to over the course of the project? To what measure?** | | | | |
| Leadership & Planning (Vision, Strategy, Objectives & Planning) | | | Choose an item. | |
| Organisation Context (Culture, Collaboration & Strategic Intelligence) | | | Choose an item. | |
| Operation | | | Choose an item. | |
| Supports (Resources, Skills, Tools & Methods, IP) | | | Choose an item. | |
| Evaluation & Improvement | | | Choose an item. | |
| **Please disclose how inputs, throughputs, outputs and outcomes of this project were measured (Please upload a chart to demonstrate jpg only)** | | | | |
| Click or tap here to enter text. | | |  | |
| **Without impacting other aspects of their business, please indicate which resources the client needs to allocate to implement their innovation strategy** | | | | |
| Click or tap here to enter text. | | | | |
| **What key elements of the ISO 56002 Standard does the client need to implement in their innovation strategy?** | | | | |
| Leadership & Planning | | | | |
| Organisation Context | | | | |
| Operation | | | | |
| Supports | | | | |
| Evaluation & Improvement | | | | |
| **Please indicate any further training that the project team requires around ISO 56002 Standard elements** | | | | |
| Specify Team Member. | Leadership & Planning  Organisation Context  Operation  Supports  Evaluation & Improvement | Indicate reason for training. | | Specify when training should be undertaken. |
| Specify Team Member. | Leadership & Planning  Organisation Context  Operation  Supports  Evaluation & Improvement | Indicate reason for training. | | Specify when training should be undertaken. |
| Specify Team Member. | Leadership & Planning  Organisation Context  Operation  Supports  Evaluation & Improvement | Indicate reason for training. | | Specify when training should be undertaken. |
| Specify Team Member. | Leadership & Planning  Organisation Context  Operation  Supports  Evaluation & Improvement | Indicate reason for training. | | Specify when training should be undertaken. |
| Specify Team Member. | Leadership & Planning  Organisation Context  Operation  Supports  Evaluation & Improvement | Indicate reason for training. | | Specify when training should be undertaken. |
| **Please specify any further actions that were agreed in the strategy implementation** | | | | |
| Click or tap here to enter text. | | | | |

PART III Other Project Details

|  |  |
| --- | --- |
| **Has the client been advised to contact IDA Project Executive for access to Innovation Plus Scorecard to re-take this questionnaire?** | Choose an item. |
| **Will the client implement further Innovation projects?** | Choose an item. |
| **Please include any other comments below** | |
| Click or tap here to enter text. | |

Part IV: Declaration

|  |  |
| --- | --- |
| **Name of Company Contact** | Click or tap here to enter text. |
| **Signed by Company Contact** |  |
| **Date** | Click or tap to enter a date. |
| **Name of Innovation Advisor** | Click or tap here to enter text. |
| **Signed by** |  |
| **Date** | Click or tap to enter a date. |

# APPENDIX 2

InnovateStart Programme Impact Metrics – Insert Company Name

|  |
| --- |
| **Innovation Score at Project Outset (as per Innovation Scorecard report)** |
| 1-2 Early Stage  2-3 Early Stage  3-4 Intermediate  4-5 Advanced  5 World Class |
| **ISO 56002 Innovation Management Elements Addressed (choose all that apply)** |
| Leadership & Planning (Vision, Strategy, Objectives & Planning)  Organisation Context (Culture, Collaboration & Strategic Intelligence)  Operation  Supports (Resources, Skills, Tools & Methods, IP)  Evaluation & Improvement |
| **List the added value and other innovation activities or benefits that have emerged as a result of this programme (max. 5)** |
| Idea 1… |
| Idea 2… |
| Idea 3… |
| Idea 4… |
| Idea 5… |
| **By what estimate did this programme improve communication & alignment with HQ?** |
| <10% Improvement  10-20% Improvement  20-50% Improvement  50-80% Improvement  >80% Improvement |
| **By what estimate did this programme improve the culture & openness of the operation?** |
| <10% Improvement  10-20% Improvement  20-50% Improvement  50-80% Improvement  >80% Improvement |
| **How likely is it that this programme will result in a strategic training plan for the organisation in the next 12 months?** |
| **Not at all likely Extremely Likely**  0  1  2  3  4  5 |
| **How likely is it that this programme will result in a genuine transformation of the Irish site?** |
| **Not at all likely Extremely Likely**  0  1  2  3  4  5 |

# Appendix 3

# InnovateStart CASE STUDY

|  |  |
| --- | --- |
| **Company**  **Name** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. |
| **Website** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **What we do** | Click or tap here to enter text. |
| **Project Background** | Click or tap here to enter text. |
| **Strategic Challenges** | Click or tap here to enter text. |
| **Client Innovation Journey** | Click or tap here to enter text.  Briefly highlight the various steps that the client went through with the Innovation Advisor to achieve key outcomes |
| **Results/Outcomes** | Click or tap here to enter text. |
| **Company Quote** | Click or tap here to enter text. |
| **Can IDA use case study for Internal use only ?** | Choose an item. |
| **Can IDA use case study for external use ?** | Choose an item. |
| **Signature of Company Contact** |  |