**Core Start up Business Plan**

**Core Title:**

**Provider (Director)**:

**Address**:

**Telephone**:

**e-mail**:

***Department Head endorsement***:

I have reviewed the business plan and I consider this core service to be essential for

furthering science at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief of Date

**Financial Guarantor endorsement:**

I believe that this core will be self-supporting within a reasonable time. Since I believe this to be an essential service, the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **or** Fund number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be the guarantor of any deficits that the core might encounter till it becomes self-supporting.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Title

**Approval**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Harry Orf, SVP for Research Date

Massachusetts General Hospital

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paul J. Anderson, SVP for Research Date

Brigham and Women’s Hospital

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Shelly F. Greenfield, Chief Academic Officer Date

McLean Hospital

**Table of contents**

|  |  |
| --- | --- |
|  | Page number |
| Summary | 4 |
| General description of the Core Facility | 5- |
| Service and Technology |  |
| Implementation |  |
| Competition analysis |  |
| Volume and Pricing |  |
| Operational plan |  |
| Personnel |  |
| Financial Plan |  |
| Appendix |  |
| Checklist |  |

**Summary**

Please provide an executive summary of the business plan (150 words limit). Please avoid technical jargons and acronyms. **General Description of the Core Facility**

Core Mission statement (please be succinct):

Core Goals and Objectives:

Target sers (besides general description of the consumer, name at least five laboratories or/and users that have confirmed or to use the facility):

Novelty of the technology or services offered:

Description of the need for this technology or services and the qualifications of the provider:

**Service and Technology**

Please provide a description of the technology and the services that will be offered. Please be lucid and avoid trade jargons and acronyms. Describe the unique feature(s) of the technology/service (*not to exceed 3 pages*).

**Implementation**

Please describe the time line for the core to be fully operational. Please describe what has been done and what needs to be accomplished. A Ganntt chart would be welcome.

**Competition**

Please describe similar cores in other Institutions and commercial establishments offering similar service. A statement describing how this core will be viable in face of the competition will strengthen the business plan.

**Volume and Pricing**

Please describe the expected usage and the price structure. Please use the Budget and User fee template worksheet (link). If help with the pricing is needed contact Partners Core Management team PHSRESCOREFAC@partners.org

**Operational Plan**

Is the core accessible to any user?

Is the service/s provided on first come first serve basis?

What are the hours of operation?

Do you need specialized equipments? If so how will they be procured?

What is the physical location of the Core facility? Do you need additional space?

Do you need engineering help such as modification of space, power supply etc.? Who is funding these modifications and what is the cost for the modifications need it?

Future considerations

1. New services and anticipated new equipments for the services
2. New market or deeper market penetration

**Personnel**

How many personnel will be involved in the core? Please give brief description of each person’s role.

Director:

Manager:

Technical personnel:

1.

2.

3.

Who will be the business contact and billing contact?

Sources of personnel salaries

|  |  |  |
| --- | --- | --- |
| **Personnel** | **Core involvement****(%FTE)** | **Salary source** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Financial Plan**

Who will provide the start-up funds for the Core Facility, if any?

Is this core supported fully or in part by Federal funds? If supported by Federal funds please address the followings:

1. What type of funds?
2. What is the time frame of the funds?
3. What is the total commitment per year or time period?
4. Will these funds benefit a specific category of users or will it benefit all core users?

What is the anticipated revenue (loss) for the first 12 months?

What is the three-year revenue projection (break-even point). Please Append it as a Table.

**Exit strategy**: Unanticipated circumstances might force a drop in Core revenue. What is the exit plan if the projected revenue is not met within reasonable time (3-5 years)?

**Checklist**

Endorsement(s)

Summary

Core Description

Timeline for implementation

Operation plan

Competition analysis

Personnel

Financial plan with exit strategy

Pricing plan

Budget year 1

Budget years 2 and 3

Support letters

**Appendix**

1. Relevant reprints, if applicable.
2. Support letters from 5 or more investigators who will use the Core service.