**Management of Change**

MOC REF:

**1.What is the change?**

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| *Describe the change including timescales* |

**2.Who?**

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| *Detail who is responsible to implement the change and who needs to be involved* |

**3 Define the major components or activities of the change**

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| *This will help you identify the main risks of each component or activity that will be populated in table 7 below* |

1. **Who does the change affect?**

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| *Consider who it affects individuals, departments and organisations? Who needs to be notified of the change?* |

1. **What is the impact of the change?**

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| *Consider why the change is taking place and the impact on the organisation and its processes and procedures. Will it impact the safety culture? Does it meet all regulatory requirements?* |

1. **What follow up action is needed? (assurance)**

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| *Consider how the change will be communicated and whether additional activities such as audits are needed during the change and after the change has taken place* |

**7 Safety Issues and the risk assessment**

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| **What is the issue?**  ***Hazard*** | **What could happen as a result?**  ***Consequences*** | **How Bad will it be?**  ***Severity*** | **How likely is it to occur?**  ***Likelihood*** | **Risk**  **rating** | **What action(s) are we taking?**  ***Mitigations*** | **Action by whom and when** |
| *1* |  |  |  |  | *There may be more than one action for each issue* |  |
| *2* |  |  |  |  |  |  |
| *3* |  |  |  |  |  |  |
| *4* |  |  |  |  |  |  |
| *5* |  |  |  |  |  |  |
| *6* |  |  |  |  |  |  |

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| The management of change processes and procedures have been followed and the change can be implemented | |
| Post Holder acceptance signature | Name:  Date: |
| Safety Manager acceptance signature | Name  Date: |

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| The identified risks are considered tolerable and change is acceptable to implement | |
| Final Acceptance Signature | Name  Date: |