

**DALES MARINE SERVICES**

**HS-OP-018**

**Management of Change**

1. **PURPOSE**

The purpose of this procedure is to ensure that significant changes, temporary or permanent, are handled effectively and that risks arising from these changes affecting, quality, health, safety and the environment are controlled effectively within any Dales Marine Services (DMS) site.

1. **SCOPE**

This procedure applies to the all DMS sites and the activities of employees and contractors on those sites.

1. **INTRODUCTION**

This document is intended as general guide to help DMS effectively manage change. It clarifies the general responsibilities of DMS management in their key role in the coordination and co­operation with all involved with the change request, in planning and managing the change to ensure that risks are properly controlled.

1. **RESPONSIBILITIES**

Management are responsible for notifying QHSE of the changes being requested / suggested.

QHSE are responsible for registering all Management of Change and ensuring implementation of any Risk Assessment required to ensure that the change does not have an adverse effect on Quality, Health, Safety or Environment, but if so shall be managed and approved accordingly.

1. **PROCEDURE**

This procedure must be used to assess the impact of planned temporary / permanent changes that impact on QHSE, these include but are not limited to:

* New product, service and processes, or change to existing
* Workplace locations and surroundings
* Working conditions
* Workforce – critical changes involving positions such as Managers, Supervisors, Worker Representatives, etc.
* Equipment, i.e.
* Changing a piece of equipment
* Changes in the use of equipment due to a supplier recommendation
* Changes involving withdrawing an instrument due to problems associated with accuracy
* Changes in standards used for calibration
* Changes to legal, industry, standard and other requirements
* Change in knowledge or information about hazards, OH&S and Environmental risks
* Development in knowledge and technology

DMS will plan changes and review consequences of unintended changes to mitigate any adverse effects.

* 1. **Change Initiation**

Each significant change operation will appoint a Management of Change (MOC) Coordinator with responsibility for leading the process. MOC Coordinator should be the subject matter expert or responsible manager.

To initiate a change the MOC Coordinator must be informed of the change and they will assess with QHSE whether it should be managed formally by the MOC process

* High Risk - MOC form must be generated and submitted for assessment and approval
* Low Risk - MOC form is optional (most likely not required)

If in doubt always conduct a risk assessment/discuss with QHSE/HR Manager.

* 1. **Review and Approval**

Once the MOC has been initiated a review will be conducted. This will be organised by the MOC Coordinator and the review team will involve all relevant personnel. Thesall to include some or all of the following as determined by the nature of the change; MOC Initiator, Manager/Supervisor, QHSE Department, Worker Representatives, Managing Director (where applicable), etc.

Details of the review including the members of the review team must be entered on the MOC form.

Specific requirements will be assessed during this review, persons responsible assigned with completion dates, and details entered in section 3.0 of the MOC form. If further details or any additional requirements not detailed in section 3.0 are required, then these are recorded in section 2.0 along with persons responsible and completion dates.

Risk and Opportunities Register may have to be updated, either at Strategic or QHSE level, this will be coordinated by Managing Director or QHSE/HR Manager.

The review team should analyse the effects of the proposed change, quantify the level of initial and residual risk and record these in sections 4.0 and 7.0 respectively. If a risk assessment has been identified as a specific requirement then this is conducted in accordance with the Hazard Identification and Risk Assessment procedure and this will quantify both initial and residual risk. If no risk assessment is required, then the risk level will generally be low however the review team will review all specific requirements and confirm the level of risk.

The review team will assign an individual to approve and verify the effectiveness of the change and a date that this should be completed. The seniority of the Approver/verifier will depend on the level of risk, subject of the change and appropriate Delegation of Authority.

Details must be entered into section 4.0 of the MOC form and the approver must sign.

After the change has been approved, the MOC Form, is placed in the MOC file within the QHSE Management System folder.

* 1. **Communication and Training of the Change**

The MOC folder must be reviewed on a routine basis to assess new changes and the personnel that they are applicable to. The MOC form and any supporting documentation must be circulated to all relevant employees.

The information on the MOC form relating to the changes must be read to ensure that the changes are understood. If the changes are of particular significance, then these should be presented to relevant employees during QHSE committee meetings or Toolbox talks. Individual employees may need to acknowledge their understanding of the changes by recording on the Toolbox talk record.

Section 6.0 of the MOC form may be used as a template and altered to produce an acknowledgement sheet that includes a list of all relevant employees, if a Toolbox talk is not being used.

* 1. **Verification for Effectiveness**

Prior to the verification date, the Approver/Verifier must review the change to ensure that it has been implemented, and it is effective. This verification may also include a review of section 6.0 of the MOC form or Toolbox talk record to check that all relevant personnel have acknowledged the change

Details must be noted in section 5.0 of the MOC form, and this should also include details of any recommended follow up actions, persons responsible and completion dates.

Once the effectiveness of the change has been verified then the approver can close out the MOC by completing and signing section 7.0, the final close out.

After the change has been closed out, the MOC form is maintained in the MOC file.

All significant MOC should be reviewed during the QHSE meetings held in accordance with the Management Review procedure.

Where specific requirements identified in 3.0 of the Management of change form are critical these must be closed out before the change is implemented. However, there will be changes for which these will be ongoing, and the change may be implemented before all of these are closed out. An example of this may be training, where not all relevant staff must be trained prior to implementation providing only trained staff are involved in the implementation.

In this case these specific, non-critical requirements and the justification for their status must be recorded in section 2.0 as part of the ongoing review process.

1. **REVIEW**

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