Last update: July 6, 2020 Environment Overview Appendix Id: Service Management Manual (VAR)

|  |
| --- |
| **General** |
| **Name** | (Agency Name) Organizational Change Management Plan |
| **Document Description** | This document describes the Organizational Change Management Plan  |
| **Document Purpose** | The purpose of this document is to define the Organizational Change Management Plan for (Project Name)  |
| **Document Owner** | Change Champion | **Owner Org** | (Agency Name) |

1. **Introduction**

The purpose of this Organizational Change Management Plan is to prepare for the implementation of (Project Name). Briefly describe mission statement of overall goal for communicating change strategy.

1. **Organization Change Management (OCM) Overview**

**Briefly describe the following**:

* Objective
* Current state
* Future state
* Strategy
* Assumptions (potential impacts)
* Critical milestones
* Documentation of changes
* Stakeholder management

**Stakeholder Management (Reference Project Communications Plan)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Stakeholder Name** | **Awareness****(H/M/L)** | **Level of Support** | **Influence (H/M/L)** | **Contingency Plan (as needed)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**OCM Overview cont.: Communications**

The Change Team is responsible for developing a variety of distribution channels. Communicate face-to-face when appropriate and use written communications to back-up relationship building.

* **Frequency and method of communications** (Consider all audiences and the impact of change on day-to-day work)
* **Stakeholder Analysis** – (positive attitude, commitment)
* **Communication Activities** – (project newsletter, project website, change agent network, etc.)

**Channels for Information Distribution**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Channels** | **Target Audience** | **Content** | **Frequency** | **Responsible Party** |
| Change Team Meetings | Employees | Current project priorities | Every 30 Days | Change Team |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Training Objectives:**

Use as necessary. Link to project training plan documentation. Below are suggestions on the required or expected training resulting from the change:

|  |
| --- |
| **4. Training Objectives** |
| **(Use as necessary)** |
| Link\_To\_Training Plan\_Documentation |

**Upcoming Changes.**

Provide the organization with information necessary to prepare for **upcoming** changes**.**

|  |
| --- |
| **5. Provide the Organization with Information Necessary to Prepare for Upcoming Changes** |
| **Policy / Procedure** | **Type of Change Required** | **Suggested Plan** |
|  |  |  |
|  |  |  |
|  |  |  |

**Develop Training.**

Fill-in stakeholder group, necessary training required because of the change and ways to deliver training, such as training classes or CBTs.

|  |
| --- |
| **6. DevelopTraining** |
| **Stakeholder Group** | **Type of Training Required** | **Optimum Setting** | **Delivery Method** | **Suggested Job Aids** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Training Documentation Requirements.**

Insert all required necessary training documents, who is responsible for the training and who reviewed the training.

|  |
| --- |
| **7. Training Documentation Requirements** |
| **Training Documents** | **Author(s)** | **Reviewer(s)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Training Facility Requirements and Budget**

As applicable. If formal training is required, please not location, groups to be trained, type of training and the date

|  |
| --- |
| **8. Training Facility Requirements & Budget (as applicable)** |
| **Training Facility** | **Stakeholder Group(s)** | **Type of Training** | **Date** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Post Implementation Steps – User Groups.**

As applicable. This is to ensure that all individuals were aware of the change

|  |
| --- |
| **9. Post Implementation Steps – Users Group (as applicable)** |
| **Department/Division** | **Support Staff Name** | **Support Period** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Organizational Change Management Team.**

List those individuals assigned to the change management team, along with their role and contact information

|  |
| --- |
| **10.Organizational Change Management Team** |
| **Name** | **Department/Role** | **Contact Information** |
|  |  |  |
|  |  |  |
|  |  |  |
| **Team Member Name** | **Department** | **Contact Information** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Organizational Change Management Team / Signature.**

List below all significant change requests relative to the project implementation, as needed.

| 11. Organizational Change Management Plan Team / Signatures |
| --- |
| **Project Manager:** |  |
| *I have reviewed the information contained in this* Organizational Change Management Plan Document *and agree:* |
| Name | Title | Signature | Date**(MM/DD/YYYY)** |
|  | Executive Sponsor |  |  |
|  | Project Sponsor |  |  |
|  | Program Manager |  |  |
|  | Project Manager |  |  |
|  | Change Champion |  |  |
|  |  |  |  |

APPENDIX A: Organizational Change Management Plan Source Files

|  |  |  |
| --- | --- | --- |
| **Source File** | **File Summary** | **Location** |
| Implementation Schedule | **Inputs:*** + Project tasks/critical milestones

**Outputs:*** Deliverables & due dates
 | SharePoint: |
| Training Documents | **Inputs:*** + Document templates

**Outputs:*** + Guidelines for proper usage
 | SharePoint: |
| Policy | **Inputs:*** + PM Standard
	+ Code of Virginia

**Outputs:*** Guidelines for proper usage
 | SharePoint: |
| Standards  | **Inputs:*** + Policy
	+ Code of Virginia

**Outputs:*** Guidelines for proper usage
 | SharePoint: |
| Guideline | **Inputs:*** + Policy
	+ PM Standard

**Outputs:**Guidelines for proper usage | SharePoint: |