



Document Control Procedure

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Unit

Quality Management Commission

DOCUMENTS CONTROL PROCEDURE


Approvals

The signatures below each paper certify that this procedure has been reviewed and accepted, and demonstrates that the signatories are aware of all the requirements contained herein and are committed to ensuring their provision.

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0. SUBJECT MATTER AND SCOPE

This document defines the process of controlling of system documents for controlling the quality, how to create, change, distribute and terminate of usage of documents. The procedure defines the sequence of activities in this process, way of their performing, responsibilities and authorities for their performance.

1. REFERENCES

- IU Quality Manual (IUQME)
- IU List of External Documents (IU.QM.FR.005E)
- IU List of Internal Documents (IU.QM.FR.004E)
- Request for Changing of a Quality System Document (IU.QM.FR.039E)
- Document Revision Form (IU.QM.FR.010E)
- Document Distribution Chart (IU.QM.FR.008E)
- Documents Control Procedure (IU.QM.PR.003)
- Records Control Procedure (IU.QM.PR.004)

2. TERMS AND DEFINITIONS

Quality System Documents:

Rules of quality, procedures and instructions.

Quality Rules:

Documents that represent the quality policies, and describe controlling the university quality system through existing procedures and instructions connecting them with requests of the standard: ISO 9001:2008.

Procedure:

Document that defines or provides the way of performing of the *overall* process.

Instruction:

Document that defines or provides the way of performing of *part* of the process.

Record about quality:

Document that provides an objective proof of scope of fulfilling the requirements.

Controlling the document:

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Controlled activities of producing, adopting and distribution of documents to all participants in the process that have been described by these documents, then changes, distribution of changes to all places of usage and repealing of documents.

3. APPLICATION

All staff.

The Total Quality Management Coordinator is authorized for controlling the process of this application.

4. PROCEDURE

4.1. INTRODUCTION

System document for controlling the quality represents description of a certain process of work and as long as the process of work is being done in a described way, the document that describes it does not change. The form of all documents for controlling the quality at Ishik University is recognizable and defined by instruction for appearance, content and tagging the system documents for controlling the quality.

4.2. CODING DOCUMENTS

The QMS documentation of the university is as follows:

The coding starts with “IU”, then with an abbreviation to show in which unit it is prepared, and then another abbreviation for the type of the document (regulation, form, etc.) follows number which shows the sequence of concerning type of document. Finally, there are letters as E, K, T, A...etc. shows the language of concerning document.

Examples:

IU.QM.PR.003E Indicates that third document of procedures which is prepared at quality management committee of Ishik University and prepared in English.

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IU.QM.IN.001E Indicates that first document of instructions which is prepared at quality management committee of Ishik University and prepared in English.

Controlling of QMS documents at IU is defined through Documents Control Procedure IU.QM.PR.003E.

This document defines the process of QMS documents management, methods of creation, modification, distribution and cancelation of the application of documents.

The procedure defines the sequence of activities in this process, the manner of their performance, as well as the authority and responsibility for their implementation. Its prime objective is to prevent misuse and theft of documents, and to prevent unauthorized use of the documents.

Each activity of the process is to be carried out in an adequate, standardized and planned manner.

4.3. DESCRIPTION OF THE PROCESS

4.3.1. *Submitting the Request for Producing a Quality System Document*

Each employee who considers that it would be necessary to prescribe a process that is not described by system documentation for quality management can submit a **Request for Producing a Quality System Document (IU.QM.FR.036E)** to the Quality Standard Manager by sending it in electronic format to the official email of the Coordinator of Total Quality Management or to his/her administrative office. Coordinator of Total Quality Management has the duty that to place the item into the agenda for the first following Quality Management Committee meeting to consider this request.

4.3.2. *Analysis and Approval of the Request*

At the meeting, the members of the Committee analyze the submitted request.

On the grounds of having the knowledge about the structure of the system for controlling the quality, its processes and vision about development of system for controlling the quality, and considering the consequences of describing of the

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submitted process, the Committee makes a decision about approving or refusing the submitted request.

Coordinator of Total Quality Management in accordance with the decision of the Committee prepares a decision about production of the system document for controlling the quality.

If the decision is positive, two copies are prepared: one copy is delivered to the owner of the process, and the other one is archived in the Committee for standardization and insurance of the quality.


The next stage is ‘production of a template for a new document’: If a decision is negative, or the **Request for Producing a Quality System Document** is refused, the process is considered to be finished, and the decision about that does not have to be preserved.

4.3.3. Production of a Template for a New Document

The owner of the process creates a template of a new document on the basis of **Instructions for the Format the Quality Management System Documents (IU.QM.IN.004E)**, and all legal acts, technical-technological documentation and Standard for Accreditation of Higher Educational Institutions that refers to the process that is described by the new system document for controlling the quality, and delivers the document in electronic version to the Committee for standardization and insurance of quality.

4.3.4. Adjustment of a Template of a Document

The template of the document is analyzed by the Committee for standardization and insurance of quality in cooperation with the author. The template is then tested; additional changes are done based on complaints and suggestions. The author sends the final electronic version of the template to the Committee. The Quality Standard Manager informs the Committee about the finalized review of the template at the first Committee meeting.

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4.3.5. Adoption of a New Document

Adjusted template of a document is analyzed at the Committee meeting. If there are any complaints or suggestions, the document is returned to the author for further review.

If there Committee finds the template suitable for application, it makes a **Decision about Producing a Quality System Document (IU.QM.FR.035)** which is archived by the Committee.

This way, the document is ready for distribution.

4.3.6. Distribution of a Document

The Coordinator of Total Quality Management singles out each form from the document and sends the adopted document and the separated forms by e-mail to the administrator of the official web site of the University (which may be the intranet site until the administration decides to make the document open to public). The administrator of the web site converts the document into PDF format and posts it to the site. The related forms can be posted to be web in MS Word or fillable PDF format. By posting the document and the related forms to the official web site (and/or the intranet site), the distribution is performed.

The documents are also posted to the relevant folder on the intranet or internet.

Nobody has the privilege to change the document himself/herself. In that way, system documents are kept safe.

The document on the intranet site is considered as original. Employees can print the document from the site but the printed versions are considered as ‘uncontrolled copies’. This way, the ‘distribution’ takes place, because the employees who are responsible for performing the process have direct access to these documents that describe the process wherever it is applied.

4.3.7. Application / Usage of Documents

After posting a document and the form(s) on the University web site, and providing access to the employees who perform the described process, the application stage starts.

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Each document that is accessible from the intranet site has a valid status for revision of a document.

During the application, the executors fill in the forms with data based on the described process, which proves that the activities of the process are being done. During the application, the need can arise for changing the document to suit the process better.

The next stage is: Starting a request for *changing* a document. During the application, if the need arises for change(s) in a document, the process stops to be performed or it becomes part of another process which is described as ‘the new or the revised document’.

Then, the next stage is: Starting a request for *rejecting* a document. Each of these two cases can be started by any employee of the University.

4.3.8. *Starting a Request for Changing a Document*

If the application of a document requires a change in the document (some additional data, wording, style, order, etc.) which can be caused by various inconsistencies in terms of performance, environmental impact or changes in the system and other factors; the employee that noticed a need for changing the document delivers a **Request for Changing of a Quality System Document (IU.QM.FR.039E)** to the Coordinator of Total Quality Management. The Coordinator of Total Quality Management inserts the request into the agenda for the first forthcoming Committee meeting.

4.3.9. *Deciding about Validity of the Changes*

At the Committee meeting, analysis of the submitted request is performed and validity of change on the document is discussed.

If the required change is not valid, the process is returned to the applicant;

Otherwise, the Committee makes a decision about validity of the **Decision about Validity of a Change of a Quality System Document (IU.QM.FR.040E)**, and updates the system accordingly.

4.3.10. *Conduction of Changes on a Document*

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The Committee performs a series of changes on the existing version of a document in the prescribed way.

The revision number of the document is increased by 1 only if:

- the number of required changes exceeds 5.
- the process suffers a dramatic change.

Changes in wording, elaborating on detailed explanation of an existing process, and tiny changes in the attachments of documents are considered as ‘small changes’. Adding a new activity or a new form about the flow of the process, or reengineering the process completely are considered as ‘big changes’ of a system document for controlling the quality. The change is indicated in the **List of Changes (IU.QM.FR.041E)**, in the field “Description of Changes”, under the same ordinal number of the change that appears in the footer (or header) of the document.

The same process is followed in the next stage of change request, that is, if the number of changes in the new stage is less than five, it will be considered as a ‘small change’.

The list of changes is filled in and kept by the Committee.


4.3.11. *Distribution of Changes on a Document*

The Coordinator of Total Quality Management follows the same procedure as explained in 4.3.6: Distribution of a Document.

The administrator of the web site deletes the marked documents and forms and uploads the changed versions. This way, distribution of changes is done.

4.3.12. *Starting a Request for Rejecting a Document*

If there is a need for rejecting a document (i.e. if the process becomes redundant or it becomes a part of another process) the employee that notices a need for rejecting a document fills in a **Request for Rejecting of a Quality System Document (IU.QM.FR.037E)** and sends it to the Coordinator of Total Quality Management. The Coordinator of Total Quality Management brings the issue to the first meeting of the Committee.

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4.3.13. *Deciding about Validity of the Rejection*

At the Committee meeting, analysis of the request is done.

If the required rejection on the document is not valid, the process is returned to applicant;

Otherwise, the Committee makes a decision about **Decision about Rejecting of a Quality System Document (IU.QM.FR.038E)** and updates the system accordingly.

4.3.14. *Rejection of a Document*

Coordinator of Total Quality Management informs the administrator of the web site to delete the related document.


The web site administrator acts accordingly.

4.3.15. *Responsibilities and Authority*

All employees at the University who participate in producing, changing, distribution and rejection of system documents, forms, or any related parts for controlling the quality it are obliged to apply this process.

5. **RELATED DOCUMENTATION**

- Instructions for the Format of the Quality Management System Documents (IU.QM.IN.004E)
- Request for Producing a Quality System Document (IU.QM.FR.035E)
- Decision About Production of a Quality System Document (IU.QM.FR.036E)
- Decision About Adopting of a Quality System Document
- Request for Rejecting of a Quality System Document (IU.QM.FR.037E)
- Decision About Rejecting of a Quality System Document (IU.QM.FR.038E)
- Request for Changing of a Quality System Document (IU.QM.FR.039E)
- Decision About Validity of a Change of a Quality System Document (IU.QM.FR.040E)
- Document Revision Form (IU.QM.FR.010E)

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- List of External Documents (IU.QM.FR.005E)
- List of Internal Documents (IU.QM.FR.004E)
- List of Changes (IU.QM.FR.041E)
- Document Distribution Chart (IU.QM.FR.008E)



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