MASENO UNIVERSITY

DOCUMENT TITLE	PROCEDURE FOR CONTROL OF DOCUMENTED INFORMATION		
DOC. NO:	MSU/VC/MR/OP/01	**ISSUE NO:**	3
DATE OF ISSUE	8TH JUNE, 2018	**REV. NO:**	0
AUTHOR	**MR**		
AUTHORIZED BY:	VICE-CHANCELLOR	**ISSUED BY:**	MANAGEMENT REPRESENTATIVE
SIGNATURE		**SIGNATURE**	

0.1 DOCUMENT CHANGES

#	Date	Details of Change		Authorization
	(dd-mm-yy)	Page	Clause/sub clause	Title
1				
2				
3				

0.2 DOCUMENT DISTRIBUTION

This quality management procedure shall be available on the Maseno University Website for authorized users.

1. PURPOSE

This procedure sets out Maseno University methodology for developing and controlling quality management system documentation in order to ensure effective planning, operation and control of the quality management system.

2. SCOPE

This procedure applies to all documentation to be used within the quality management system. The procedure covers the QMS documentation structure, preparation, control, distribution, creation and updating, retrieval, review, authorization, protection, storage, version control, retention and disposition of documents. In addition, it describes methods of identification and control of documents of external origin used within the QMS.

3. REFERENCES

3.1 ISO 9001:2015– Quality Management System – Requirements

3.2 MSU-Quality Manual

3.3 ISO 9000:2015, Quality Management Systems –Fundamentals and vocabulary

3.4 ISO 10013:2001, Guidelines for Quality Management System Documentation

4. TERMS (DEFINITIONS)

4.1 **Definitions of Terms Used:**

For the purpose of this procedure the following terms shall apply in addition to those already defined in the Maseno University Quality Manual.

4.1.1 **Documented information**: information required to be controlled and maintained by Maseno University.

4.1.2 **Procedure:** A document specifying the way an activity or process is undertaken.

4.1.3 **Work Instruction:** A document that details descriptions on how to perform and record a task.

4.1.4 **Retained Information (Record):** documents that serve as objective evidence of a process or procedure or work Instruction

4.1.5 **Documents of external origin**

These are documents which are used within the quality management system to ensure correct performance of processes without necessarily making any further detailing. Documents of external origin in most cases may include customer supplied specification, standards, equipment manuals, legislation and regulations (including Acts, legal notices and government circulars/directives and guidelines

5. RESPONSIBILITIES

The Management Representative and Heads of the respective Departments/Sections in the University shall ensure the effective implementation of this procedure.

6.0 METHOD

6.1 Creating and updating documents

In principle, documented information created for application of the QMS shall be based on the need to ensure effective planning, consistent operation and control of process (es).

6.1.1 Each process owner or HOD shall identify the necessary documentation needed based on the requirement for operation of the process (es) or as required by a specific standards

and/or regulations. The need for documented information to exist shall be identified and agreed at relevant level or function.

6.1.2 Once documentation needs have been agreed upon, the process owner or HOD shall designate staff or committee to develop the relevant draft document in accordance to this procedure.

6.1.3 In addition to the examples given in clause 6.9 of this procedure, each document to be developed shall be assigned a proposed document identifier comprising the name of the organization, the division and department under which the document falls, the procedure and procedure number. For example procedure for Control of documented information would adopt identifier **MSU/VC/MR/OP/01** where;

MSU is the name of the organization

VC is the head of the division and also denotes responsibility for approving the document

MR is the department and also the author

OP document/process type

01 document/process number

6.1.4 Each document under development shall contain all the applicable information elements e.g University logo, University name, title of the document, document number, author, issue number, date of issue and authorization as outlined on the cover page above.

6.1.4.1 Quality Policy and Quality Objectives shall contain the university logo, name of the university, title, authorization and date.

6.1.4.2 Other sections of the document being developed shall include; table of document changes, document distribution, purpose, scope, references, terms and definition, responsibility and methodology.

6.1.5 Each draft document once ready shall be proofread by the authors and relevant designated staff in the relevant area.

6.1.6 Where practicable the draft document shall be circulated to other members of the functional area or department, and additionally submitted to MR for review where such a document shall have a wider application before approval for final issuance.

6.1.7 The documentation shall be in English language except where otherwise authorized by the top management or resultant from statutory or regulatory requirements.

6.1.8. The Quality Management System Manual and procedures shall be in electronic media whilst Quality Policy and Quality Objectives shall be in both.

6.2 Approval

Maseno University shall control the issuance of documents for suitability and adequacy through the approval levels stated below:

6.2.1 All Council documents shall be approved by the Chairman of Council and issued by the Vice-Chancellor.

6.2.2 Quality Manual, Quality Policy, Corporate Quality Objectives, and procedures namely; Control of documented information, Control of Retained Information, Internal Quality Audit, Nonconformity and Corrective Actions and Preventive Action shall be approved by the Vice-Chancellor and issued by the Management Representative.

6.2.3 All Committee documents shall be approved by the chairs of the committees and issued by the respective secretaries.

6.2.4 All documented sectional/departmental procedures shall be approved by the respective Deputy Vice-Chancellors and issued by Management Representative.

6.3 Review, Updating and Re-approval of documented information

6.3.1 All documents within the QMS shall be subject to periodic reviews or when there is a necessity. The need for a revision/amendment may result from internal or external audits, process control measures, inconsistent process or service results, staff observations or other needs.

6.3.2 Changes to documents and data shall be reviewed and approved by the same functions that performed the original review and approval as detailed in clause 6.1 and 6.2 above.

6.3.3 Any staff member who finds it necessary shall initiate request for a change or amendment to any document by filling a change amendment request form **MSU/VC/MR/OP/01/fm 01.**

6.3.4 The change amendment request form shall be submitted to the MR by the Head of respective department.

6.3.5 MR shall liaise with the function responsible for authorship and evaluate the change/ amendments requested then grant approval or reject the request. The document shall then be approved and issued as indicated on cover page.

Note: Functional Heads shall ensure communication of the final changes to amended documents which affect their area. These can be through, meetings, memos, email or circulars.

6.4 Identification of Revised QMS Documents

6.4.1 All QMS documents shall contain a document number and table of changes consisting of the date of change, page, clause/sub clause, details of the changes and authorization with exception to Quality Policy and Quality Objectives whose changes shall be denoted by date of authorization.

6. 4.1 The revision and issue status of the document shall be identified through revision and issue numbers indicated on the cover page of each document.

6.4.2 If the changes are minor, the revision number of the document will change but the issue number will remain the same.

NOTE: A minor change is change in documentation that does not affect the process (es).

6.4.3 If the changes are substantial and affect more than a half of the sections, the document shall be reissued with the revision status reverting to 0.

6.4.4 The changes shall be indicated in subclause 0.1 section (the table of changes) of each procedure.

6.5 Availability of Documents at Points of Use and protection

6.5.1Controlled copies of QMS Quality Manual and procedures shall be available in electronic format on the University website as indicated in clause 0.2 of this document.

6.5.2 All QMS documentation shall be contained in the "QMS Documentation" folder on the University website maintained on the ICT network.

6.5.3 The documents listed under "QMS Documentation" folder on the website shall be considered to be the master documents. Access to change/amend these documents shall be done via the MR.

6.5.4 All QMS documents stored on MSU website shall be held secure to ensure integrity, protection from destruction, disclosure, alterations, delays or undesired manipulations.

6.5.5 Back up of MSU website contents shall be undertaken by ICT section.

6.5.6 MR shall have back-up of all contents of the QMS documentation folder as an additional safeguard of QMS documents.

6.5.7 Sectional Heads shall ensure that any documented information retained in paper format is protected against risks arising from poor ventilation and other adverse weather conditions.

6.6 Storage and Preservation, Including Preservation of Legibility of Documents

6.6.1 All QMS documents shall be typed in Font – (Times New Roman), Font Size – (12) and Line Spacing (1.5)

6.6.2 Printing and photocopying of documents will be done in such a way that documents shall be legible.

6.6.3 Documented information retained as evidence of performance of processes shall be stored in conditions that shall ensure that they remain legible.

6.6.4 All HODs shall ensure that all documented information retained in their respective departments is protected from unauthorized access and removal. This information shall be accessible only to authorized personnel and stored in locations with controlled access including but not limited to lockable cabinets

6.6.5 Where lockable cabinets are used, only authorized personnel shall have access to the cabinets.

6.6.6 Documented information retained in the computer system shall have backup copies in electronic form and protected from unauthorized access.

6.7 Retention and Disposition

6.7.1 Each section/department shall adhere to retention schedule for documented information in line with University policies and National Archives regulations

6.7.2 The schedule shall state the type and the period of retaining the documented information within the section/department, responsibility, after which time they shall be disposed in accordance with the provisions of National Archives regulations and Public Procurement and Disposal Act (2015).

6.7.3 Documented information shall be retained in defined systems including identification of files and folders that ensure ease of retrieval.

6.7.4 All HODs shall ensure files/ folders containing quality records are assigned unique identifiers structured in a way that recognizes the University, Division, department, the type of record, record number and the title in the given format: **MSU/VC/DQA/GC/01-File** for General Correspondence.

6.7.5 Where records have exceeded their retention periods, they shall be appropriately filed, labeled and identified as **"CLOSED FILES",** indexed by type, month and year and stored in designated places.

6.7.6 Where a document is rendered obsolete but is retained at the function for any other purpose, such document shall be stamped "**OBSOLETE**" and secured at a location specified by the function.

6.7.7 For the electronic copies, the document shall be watermarked with the words "OBSOLETE" and transferred to a file folder named obsolete.

6.8 Documents of External Origin

6.8.1 Where documented information of external origin is applicable in its process the designated HOD shall approve the use of such documents for their inclusion in the process operation.

6.8.2 The HOD shall derive a list/register of such documents of external origin including the version in use and/or either given by year of publication in addition to their distribution within the organization.

6.8.3 The list/register shall be kept updated when new documents are added or versions of documents of external origin are received.

6.8.4 Each section/department shall state the frequency and method to be applied in their documentation.

6.9 Identification of Maseno University Documented Information and Records

As a basis Maseno University QMS documentation identification shall incorporate abbreviations and Acronyms denoting name of the University(MSU), division(VC,AFD,ASA,PRI), section/department(MR,LIB,QAPM) the process/document(OP,QAPM,TCH) under reference, register (Reg), form(fm), work instruction (WI), list (L), report (Rpt), worksheet(WS). Examples for each are given below:

Quality Manual	:	MSU/VC/QM/01
Quality Policy	:	MSU/VC/QP/01
Procedure for Internal Audit	:	MSU/VC/MR/OP/02
Procedure for Teaching	:	MSU/ASA/ACA/OP/03
Procedure for Library Services	:	MSU/ASA/LIB/OP/01
Procedure for Performance Management	:	MSU/VC/QAPM/OP/01
Class Attendance Register	:	MSU/ASA/ACA/OP/03/Reg/01
Corrective Action Request Form	:	MSU/VC/MR/OP/01/fm 04
Exam Invigilation Guidelines	:	MSU/ASA/ACA/OP/04/WI 01
Course Evaluation Report	:	MSU/VC/DQA/OP/01/Rpt/01

7.0 APPENDIX 1: **Change/Amendment Request Form**

MASENO UNIVERSITY

CHANGE/AMENDMENT REQUEST FORM

To be completed by officer requesting change

Department / Section:		**Request No.:**	
PART I: CHANGE/AMENDMENT DETAILS			
Requesting Officer:		**Designation:**	
Document No:		**Document Title:**	
Document Status			
Issue No:		**Revision No:**	00
Change/Amendment Sought:			
Reason for Change/Amendment:			
Signature:		**Date:**	

To be completed by Head of Department / Section

PART II: CHANGE/AMENDMENT APPROVAL				
Request Status:	**APPROVED or DENIED:**		**Date:**	
If Denied state reason:				
Signature:		**Designation:**		

Management Representative's Office Only

PART III: ACTIONS ON CHANGE / AMENDMENT					
Actions proposed:					
Completion Date:		**Signature:**		**Designation:**	