

# JARAMOGI OGINGA ODINGA UNIVERSITY OF SCIENCE AND TECHNOLOGY

DOCUMENT: PROCEDURE FOR CONTROL OF DOCUMENTS

DOC. NO: JOOUST/OP / 01

AUTHORIZED BY: VICE-CHANCELLOR



ISSUED BY: MANAGEMENT REPRESENTATIVE SIGNATURE:

# **0.1 DOCUMENT DISTRIBUTION**

| S. NO     | ТҮРЕ      | OFFICE                     |
|-----------|-----------|----------------------------|
| i.        | Original  | QMR                        |
| ii.       | Сору      | Vice-Chancellor            |
| iii.      | Сору      | DVC, PAF                   |
| iv.       | Сору      | DVC, AA                    |
| <b>v.</b> | Сору      | DVC, RIO                   |
| vi.       | Сору      | FHs                        |
| vii.      | Soft Copy | JOOUST Website by password |

### **0.2 DOCUMENT CHANGES**

| DATE  | CHANGES | AUTHORIZED BY |
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#### 1.0 Purpose:

To ensure that documented information required by the University and those of external origin are identified, controlled and maintained as appropriate.

#### 2.0 Scope:

This procedure covers creation, authorization, distribution, storage and maintenance of documents originating from the University and receipt and issuance of all documents of external origin.

#### 3.0 References:

- i. ISO 9001:2015 Standard
- ii. JOOUST Quality Manual

#### 4.0 Abbreviations, Acronyms and Definitions:

| i.    | DVC, AA:  | Deputy Vice-Chancellor, Academic Affairs                      |
|-------|-----------|---|
| ii.   | DVC, PAF: | Deputy Vice-Chancellor, Planning, Administration and Finance  |
| iii.  | DVC, RIO: | Deputy Vice-Chancellor, Research, Innovation and Outreach     |
| iv.   | FHs:      | Functional Heads (DVC, Deans, Directors, Registrars, Heads of |
|       |           | Sections/Units, Chairpersons of Departments                   |
| v.    | JOOUST:   | Jaramogi Oginga Odinga University of Science and Technology   |
| vi.   | MIC:      | Management Implementation Committee                           |
| vii.  | MRC:      | Management Review Committee                                   |
| viii. | VC:       | Vice-Chancellor   |
| ix.   | QMR:      | Quality Management Representative                             |
| х.    | QOC:      | Quality Objectives Committee                                  |

#### 5.0 **Responsibilities**

#### 5.1 Principal Responsibility

The Management Representative shall ensure the implementation and supervision of this procedure.

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#### 5.2 Other Responsibilities

Deans, Registrars, Directors, Chaipersons of Departments and Heads of Sections/Units in the University shall be responsible for the implementation and effective supervision of this procedure at their respective functions.

#### 6.0 Method

#### 6.1 Document Approval

JOOUST shall control the issuance of documents through the approval levels stated below:

- 6.1.1 All documents of the University QMS in Level One and Two shall be approved by the Vice-Chancellor and issued by the Quality Management Representative.
- 6.1.2 All Council documents shall be approved by the Chairman of Council and issued by the Vice-Chancellor
- 6.1.3 All University Management Board documents shall be approved by the Vice-Chancellor and issued by the respective DVC.
- 6.1.4 All Senate documents shall be approved by the VC and issued by the DVC (AA).
- 6.1.5 All documents from the Deans Committee shall be approved by the DVC (AA) and issued by the Registrar (AA).
- 6.1.6 All documents from Planning, Administration and Finance Division shall be approved by the DVC (PAF) and issued by respective Heads of Departments.
- 6.1.7 All documents from Academic Affairs Division shall be approved by the DVC (AA) and issued by the respective Deans, Directors and /or respective CoDs
- 6.1.8 All documents from Research, Innovation and Outreach Division shall be approved by the DVC (RIO) and issued by the Registrar (RIO), Directors and/or respective Coordinators.
- 6.1.9 All departmental Quality Objectives shall be approved by the Chairperson, Quality Objectives Committee and issued by the respective Functional Heads.

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- 6.1.10 All documents from Schools/Directorates/Institutes' shall be approved by the respective Deans/Directors and issued by Chairperson of Department/Coordinators.
- 6.1.11 All documents from the Departments shall be approved by Heads of Departments and issued by the Section/Unit Heads.
- 6.1.12 All documents from the University Library shall be approved by the DVC (AA) and issued by the University Librarian.
- 6.1.13 All documents from the University Health Services shall be approved by the DVC (PAF) and issued by the Chief Medical Officer.
- 6.1.14 All documents from the office of the Dean of Students' shall be approved by the DVC (AA) and issued by the Dean of Students.
- 6.1.15 All documents from the Sports Directorate shall be approved by the DVC (AA) and issued by the Director of Sports.
- 6.1.16 All documents from the Laboratories/Workshops shall be approved by Heads of Departments and issued by the Technician In-charge.
- 6.1.17 All documents from Finance Department shall be approved by DVC (PAF) and issued by the Finance Officer.
- 6.1.18 All documents from Internal Audit shall be approved by the VC and issued by the Chief Internal Auditor.
- 6.1.19 All documents from the Legal Office shall be approved by the VC and issued by the Chief Legal Officer.
- 6.1.20 All documents from the Office of Public Relations shall be approved by the VC and issued by the Public Relations officer.
- 6.1.21 All documents from the Security Office shall be approved by the VC and issued by the Chief Security Officer.
- 6.1.22 All documents of external communication from the University shall be authorized by the VC.
- 6.1.23 All QMS forms and registers shall be approved by the QMR.
- 6.1.24 All other forms shall be approved by the respective DVCs and issued by the respective functional Heads.

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### 6.2 Review, Up-dating and Re-approval of Documents

- 6.2.1 Changes to documents shall be approved and issued by the same functions that performed the original review, approval and issue.
- 6.2.2 FHs or members of staff shall initiate/request for document changes/amendment on any University QMS document when the need arises.
- 6.2.3 The request for change(s)/amendment(s) on QMS documents shall be submitted to the QMR in writing for consideration.
- 6.2.4 The QMR shall consider the request and recommend as appropriate
- 6.2.5 The QMR shall initiate review on QMS documents after every three years or whenever the need arises to ensure suitability and adequacy.

Note: Functional Heads shall ensure communication on the final changes to members of their respective departments. These can be through, meetings, memos, email and the University website.

### 6.3 Identification of Revised QMS Documents

- 6.3.1 Revised QMS documents shall contain a document title, number and change table consisting of the date of change, the specific change, reference to changed clause(s) and authorization.
- 6.3.2 The revision status of the document shall be identified through issue and revision numbers indicated on each document.
- 6.3.3 The revision number of the document shall change, in the case of minor changes but the issue number shall remain the same.
- 6.3.4 The document shall be re-issued where the changes are substantial/fundamental to the point that the meaning is significantly altered or where revision has been made more than six times.

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#### 6.4 Availability of documents at points of use

- 6.4.1 QMS electronic documents shall be uploaded on the University Website and made accessible to all University functions through use of passwords. However, hard copies shall be controlled through a distribution list.
- 6.4.2 All other University documents shall be distributed and controlled according to stipulated University rules and regulations approved by Top Management, in line with statutory and regulatory requirements.

### 6.5 Legibility of documents

- 6.5.1 All QMS Level I and II documents shall be typed in Font (Times New Roman), Font Size – (12) and Line Spacing (1.5)
- 6.5.2 Printing and photocopying of documents shall be done in such a way that they remain legible.
- 6.5.3 Printing and photocopying of documents shall be done in duplex mode.
- 6.5.4 Documents shall be stored in conditions that ensure that they remain legible.

### 6.6 Documents of external origin

- 6.6.1 Only authorized officers shall receive documents from external sources on behalf of the University.
- 6.6.2 The Receiving Officer shall maintain lists (titles) of documents of external origin for ease of identification and control of their distribution.
- 6.6.3 The receiving officer shall issue the received documents accordingly.

#### 6.7 Use of obsolete documents

- 6.7.1 All documents shall be dated as per their time of approval for use, date of revision and revision number.
- 6.7.2 Where QMS document shall be superseded by a new version, the QMR shall withdraw the old version and in case any obsolete document is retained, the QMR shall stamp the word "OBSOLETE" on the document.

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# 6.8 Uncontrolled copies of QMS documents

- 6.8.1 Uncontrolled copies of the documents are issued upon request, and are not updated unless requests are made.
- 6.8.2 Uncontrolled copies of the documents used within JOOUST shall be stamped "uncontrolled" on the front sheet.

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