

# QUALITY MANAGEMENT SYSTEM (QMS) PROCEDURE

<b>Section</b>	Quality		
<b>Approval Date</b>	24.07.2013	<b>Approved by</b>	Academic Committee
<b>Next Review</b>	29.07.2022	<b>Responsibility</b>	Executive Director – Customer Experience and Excellence
<b>Last Reviewed</b>	29.07.2020	<b>Key Evaluation Question</b>	6

## PURPOSE

To ensure the Institute’s policies and procedures guide and reflect agreed standards and practices.

To meet the objectives set out in the QMS policy by setting out the required actions and responsibilities to enact or implement the process.

Note: the process for developing, reviewing, publishing and tracking policies and procedures is coordinated centrally so that the **documented** Quality Management System (QMS) is integrated and consistent.

## SCOPE

All NMIT policies and procedures. Collectively, these form the documented **Quality Management System (QMS)** of NMIT and are held as Controlled Documents on NMIT’s Intranet and are available on the public NMIT website.

Individual policies and procedures will be cross referenced and linked to other related policies and procedures within the QMS.

### NOT IN SCOPE

Forms, Templates and Guidelines. These documents are available to NMIT Staff **only**, on the NMIT intranet, and are not subject to approval or version control in the same way as the policies and procedures. They should, however, be reviewed at the same time as the policy or procedure to which they relate.

## DEFINITIONS

The definitions of specialist terms relevant to this policy/the relevant programme or business support area are listed below:

<b>Approval Date</b>	The date that the document was last approved by the Approval Body. Not all reviewed documents need to be re-submitted to the Approval Body seeking approval.
<b>Last Reviewed Date</b>	The date that minor or major changes were approved by the staff member responsible for the document content. This applies even if no changes are identified.
<b>Metadata</b>	Data describing context, content and structure of records and their management through time. [ISO 15489]

<b>Minor Changes</b>	Changes that do not alter the intent of the policy or procedure. Minor changes include updating position titles, references, definitions and re-formatting.
<b>Next Review Date</b>	The agreed review date by the approval body and/or the staff member responsible for the document. The published review date does not preclude updates occurring before this date, in instances when content is sufficiently incorrect to be deemed to be putting the institute at risk.
<b>Quality Management System (QMS)</b>	The formalised system that documents policy, procedure and processes, and responsibilities for achieving the consistent quality outputs which occur within NMIT to enable agreed student and stakeholder expectations to be met. The documented QMS sets out the policies, structure, processes, responsibilities and resources; and describes how these are coordinated to achieve quality.

## RESPONSIBILITIES

<b>Academic Standards and Quality Committee (ASQC)</b>	<ul style="list-style-type: none"> <li>• Authorising the development of new policies and procedures</li> <li>• Scrutinising and endorsing all policies that require a full review, including all new policies.</li> </ul>
<b>Approval Body</b>	<ul style="list-style-type: none"> <li>• Review and approve documents under their responsibility within the agreed review cycle.</li> <li>• Ensures legislative requirements</li> </ul>
<b>Director</b> (specified in the document header as having responsibility)	<p>For each policy or procedure:</p> <ul style="list-style-type: none"> <li>• Ensuring the adherence to the policy/procedure</li> <li>• The accuracy of content; including meeting legislative requirements</li> <li>• Ensuring the document is reviewed by the due date, or earlier if required</li> </ul>
<b>Owner</b>	Identified in the meta-data of each document on the QMS (and visible on the PowerBI report), the owner will lead the review of the policy or procedure for which they have ownership.
<b>Quality Advisor (QA)</b>	<ul style="list-style-type: none"> <li>• Operational management of the QMS documentation</li> <li>• Coordinating and facilitating any consultation meetings required as part of the review process (in consultation with the Quality Enhancement Manger)</li> <li>• Editing and proof-reading all content to ensure consistency, accuracy, currency and to minimise overly academic language.</li> <li>• Designing Process Maps, charts, visual overviews to enhance comprehension of policy or procedure, and to provide a visual interpretation of any processes to be followed.</li> <li>• Making changes in consultation with the staff member identified as the “owner” (recorded in the SharePoint meta-data) of the policy or procedure.</li> </ul>

	<ul style="list-style-type: none"> <li>• Guiding and advising staff on all aspects of the documentation of the QMS, including navigation of SharePoint</li> <li>• Regularly communicating changes to the QMS to all staff</li> <li>• Maintaining SharePoint data for PowerBI Report</li> </ul>
<b>Quality Enhancement Manager (QEM)</b>	<ul style="list-style-type: none"> <li>• The overall management of the QMS</li> <li>• Identifying appropriate forum and scope of consultation process e.g. any or all of the following: a working party, consultation with SANITI for the student voice, invitation to specific staff, submission to relevant committee</li> <li>• Coordinating any consultation meetings required as part of the review process</li> </ul>

## REFERENCES

### INTERNAL

[Academic Statute - Section 1: Introduction](#)

[Coversheet for Approval of New and Significantly Changed Policy or Procedure\\*](#)

[Coversheet for Approval of Minor Changes to a Policy or Procedure\\*](#)

[Coversheet for Deletion of a Policy or Procedure\\*](#)

[Controlled Document Template – POLICY\\*](#)

[Controlled Document Template - PROCEDURE\\*](#)

[PowerBI Report - Policies\\*](#)

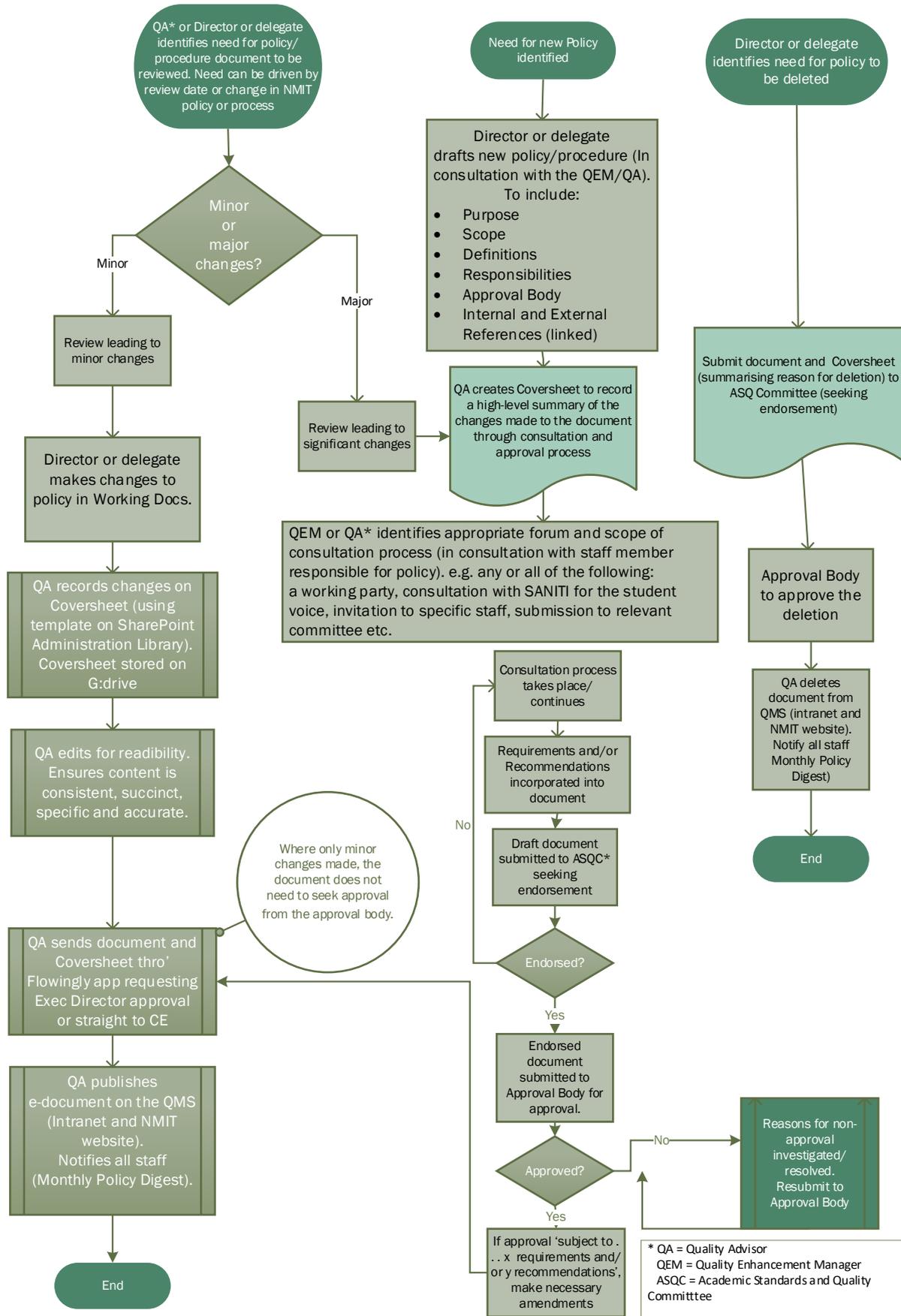
[Quality Management System \(QMS\) Policy](#)

\*available to NMIT staff only

### APPENDIX ONE

[PROCESS MAP](#)

PROCESS MAP



N.B. ALL changes to a policy document need to be documented and accompanied by a coversheet.